

**FEC
FORM 3****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼

Example: If typing, type over the lines.

12FE4M5

LARSON FOR CONGRESS

ADDRESS (number and street)

PO Box 261172



Check if different than previously reported. (ACC)

Hartford

CT

06126-1172

2. FEC IDENTIFICATION NUMBER ▼

C C00330142

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

3. IS THIS REPORT



NEW (N)

OR



AMENDED (A)

CT

01

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

(b) 12-Day PRE-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y

in the State of

(c) 30-Day POST-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y

in the State of

5. Covering Period

M M / D D / Y Y Y Y

07 / 01 / 2015

through

M M / D D / Y Y Y Y

09 / 30 / 2015

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Barry Feldman

Signature of Treasurer

Barry Feldman

[Electronically Filed]

Date

M M / D D / Y Y Y Y

10 / 14 / 2015

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3**
(Revised 02/2003)

SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Write or Type Committee Name

LARSON FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	5

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e))....	225351.16	557283.70
(b) Total Contribution Refunds (from Line 20(d))	200.00	5200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a))	225151.16	552083.70
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17)	105434.06	495174.55
(b) Total Offsets to Operating Expenditures (from Line 14).....	1041.50	6064.35
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a))	104392.56	489110.20
8. Cash on Hand at Close of Reporting Period (from Line 27).....	440820.88	
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	1889.62	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	34557.92	

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

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FEC Form 3 (Revised 12/2003)

Write or Type Committee Name

LARSON FOR CONGRESS

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
0	7		0	1		2	0	1	5

To:

M	M	/	D	D	/	Y	Y	Y	Y
0	9		3	0		2	0	1	5

I. RECEIPTS
COLUMN A
Total This Period

COLUMN B
Election Cycle-to-Date
11. CONTRIBUTIONS (other than loans) FROM:**(a) Individuals/Persons Other Than Political Committees****(i) Itemized (use Schedule A).....**

47755.00

145317.00

(ii) Unitemized.....

9090.00

30283.83

(iii) TOTAL of contributions from individuals ▶

56845.00

175600.83

(b) Political Party Committees.....

0.00

0.00

(c) Other Political Committees (such as PACs).....

168506.16

381682.87

(d) The Candidate.....

0.00

0.00

(e) TOTAL CONTRIBUTIONS (other than loans) (add Lines 11(a)(iii), (b), (c), and (d))..

225351.16

557283.70

12. TRANSFERS FROM OTHER AUTHORIZED COMMITTEES

0.00

0.00

13. LOANS:**(a) Made or Guaranteed by the Candidate.....**

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS (add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING EXPENDITURES (Refunds, Rebates, etc.)

1041.50

6064.35

15. OTHER RECEIPTS (Dividends, Interest, etc.)

301.00

812.48

16. TOTAL RECEIPTS (add Lines 11(e), 12, 13(c), 14, and 15) (Carry Total to Line 24, page 4)..... ▶

226693.66

564160.53

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

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II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	105434.06	495174.55
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of All Other Loans	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees	200.00	200.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	5000.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	200.00	5200.00
21. OTHER DISBURSEMENTS	74335.40	199886.76
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ►	179969.46	700261.31

III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	394096.68
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page 3).....	226693.66
25. SUBTOTAL (add Line 23 and Line 24).....	620790.34
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	179969.46
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	440820.88

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Robert Ball

Mailing Address 1245 Heard's Ferry Rd NW

City	State	Zip Code
Atlanta	GA	30328

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian LifeOccupation
Insurance

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		24		2015

Transaction ID : SA11AI.63554

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Janet Barnard

Mailing Address 755 Brook Park Place

City	State	Zip Code
Atlanta	GA	30342

FEC ID number of contributing
federal political committee.

C

Name of Employer
ManheimOccupation
President

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		02		2015

Transaction ID : SA11AI.63404

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

C. John E. Barrett

Mailing Address 381 Highland Street

City	State	Zip Code
West Haven	CT	06516

FEC ID number of contributing
federal political committee.

C

Name of Employer
Barrett Outdoor Communications, Inc.Occupation
General Manager

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Transaction ID : SA11AI.63899

Amount of Each Receipt this Period

2000.00

5000.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Patrick Bayliss

Mailing Address 2191 Straits Turnpike

City

Middlebury

State

CT

Zip Code

06762

FEC ID number of contributing
federal political committee.

C

Name of Employer
County Line NissanOccupation
President

Receipt For: 2016

☐ Primary
☒ Other (specify)

General

Convention

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Transaction ID : SA11AI.63558

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Josh Becker

Mailing Address 1 Gallows Road

City

Brookfield

State

CT

Zip Code

06804

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian Life Ins.Occupation
General Agent

Receipt For: 2016

☐ Primary
☒ Other (specify)

General

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		15		2015

Transaction ID : SA11AI.63533

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Kim Bruno

Mailing Address 33 Shore Road

City

Waterford

State

CT

Zip Code

06385

FEC ID number of contributing
federal political committee.

C

Name of Employer
Curtin Motor Livery ServiceOccupation
Owner/Operator

Receipt For: 2016

☐ Primary
☒ Other (specify)

General

Convention

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		19		2015

Transaction ID : SA11AI.63893

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Patricia M. Calhoun**A.**

Mailing Address 105 Deerfield Road

City

Pomfret

State

CT

Zip Code

06259

FEC ID number of contributing
federal political committee.

C

Name of Employer
State of ConnecticutOccupation
Management

Receipt For: 2016

☐ Primary
☒ Other (specify)

☐ General
☐ Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		06		2015

Transaction ID : SA11AI.63389

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Thomas Ciardella Sr.**B.**

Mailing Address 52 Forest Avenue

City

Paramus

State

NJ

Zip Code

07652

FEC ID number of contributing
federal political committee.

C

Name of Employer
Ciardella Savino LLCOccupation
Partner

Receipt For: 2016

☐ Primary
☒ Other (specify)

☐ General
☐ Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Transaction ID : SA11AI.63524

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Peter J. Cimini**C.**

Mailing Address 71 Hunters Ridge

City

Rocky Hill

State

CT

Zip Code

06067

FEC ID number of contributing
federal political committee.

C

Name of Employer
Capital Strategies GroupOccupation
Executive

Receipt For: 2016

☐ Primary
☒ Other (specify)

☐ General
☐ Convention

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Transaction ID : SA11AI.63907

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Neal F. Cunningham

Mailing Address 61 Pershing Road

City

Windsor Locks

State

CT

Zip Code

06096

FEC ID number of contributing
federal political committee.

C

Name of Employer

BES-CUT, Inc.

Occupation

Systems Manager

Receipt For: 2016

☐ Primary
☒ Other (specify)

☐ General
☐ Convention

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2015

Transaction ID : SA11AI.63508

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

Kathleen Curry

Mailing Address 80 Sycamore Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Consultant

Receipt For: 2016

☐ Primary
☒ Other (specify)

☐ General
☐ Convention

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2015

Transaction ID : SA11AI.63523

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Vincent D'Addona

Mailing Address 341 Harbor Drive

City

Lido Beach

State

NY

Zip Code

10005

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life

Occupation

Life Insurance Sales

Receipt For: 2016

☐ Primary
☒ Other (specify)

☐ General
☐ Convention

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2015

Transaction ID : SA11AI.63498

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

2300.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Daniel DeMastro**A.**

Mailing Address P.O. Box 151

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Aero-Med, LTD

Occupation

President

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2015

Transaction ID : SA11AI.63860

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

Timothy J. Devanney**B.**

Mailing Address 70 Porter Street

City

Manchester

State

CT

Zip Code

06040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Highland Park Market

Occupation

Grocer

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2015

Transaction ID : SA11AI.63382

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Timothy J. Devanney**C.**

Mailing Address 70 Porter Street

City

Manchester

State

CT

Zip Code

06040

FEC ID number of contributing
federal political committee.

C

Name of Employer

Highland Park Market

Occupation

Grocer

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

2700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2015

Transaction ID : SA11AI.63883

Amount of Each Receipt this Period

700.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3700.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Timothy J. Devanney		Date of Receipt M M / D D / Y Y Y Y 09 / 25 / 2015	
Mailing Address 70 Porter Street		Transaction ID : SA11AI.63884	
City Manchester	State CT	Zip Code 06040	Amount of Each Receipt this Period 300.00
FEC ID number of contributing federal political committee. C			
Name of Employer Highland Park Market	Occupation Grocer		
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 3000.00		
B. Full Name (Last, First, Middle Initial) Nancy J. Dinardo		Date of Receipt M M / D D / Y Y Y Y 09 / 30 / 2015	
Mailing Address 61 Suzanne Cir.		Transaction ID : SA11AI.63995	
City Trumbull	State CT	Zip Code 06611	Amount of Each Receipt this Period 500.00
FEC ID number of contributing federal political committee. C			
Name of Employer Retired	Occupation Retired		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 500.00		
C. Full Name (Last, First, Middle Initial) Anthony Domino		Date of Receipt M M / D D / Y Y Y Y 07 / 22 / 2015	
Mailing Address 83 Long Lots Road		Transaction ID : SA11AI.63509	
City New Canaan	State CT	Zip Code 06840	Amount of Each Receipt this Period 1000.00
FEC ID number of contributing federal political committee. C			
Name of Employer Associated Benefits Consultant	Occupation Benefits Consulting		
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 1000.00		
SUBTOTAL of Receipts This Page (optional).....		1800.00	
TOTAL This Period (last page this line number only).....			

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

De'Ana Dow

A.

Mailing Address 7622 Augustine Way

City

Gaithersburg

State

MD

Zip Code

20879

FEC ID number of contributing
federal political committee.

C

Name of Employer

Oglivy Government Relations

Occupation

Senior Vice President

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		20		2015

Transaction ID : SA11Al.63492

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Daniel D. Dwyer

B.

Mailing Address 2740 Hebron Avenue

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Lawyer

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

375.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2015

Transaction ID : SA11Al.63886

Amount of Each Receipt this Period

75.00

Full Name (Last, First, Middle Initial)

Michael Dzen Jr.

C.

Mailing Address 37 S Main Street

City

East Windsor

State

CT

Zip Code

06108

FEC ID number of contributing
federal political committee.

C

Name of Employer

Dzen Commercial Roofing LLC

Occupation

Business Owner

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		20		2015

Transaction ID : SA11Al.63557

Amount of Each Receipt this Period

200.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

775.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 12 OF 151

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Wendy P. Eber

Mailing Address 30 Corporate Drive

City

North Haven

State

CT

Zip Code

06473

FEC ID number of contributing
federal political committee.

C

Name of Employer

Slocum and Sons

Occupation

Distribution

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Transaction ID : SA11AI.63902

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Raphael Ekstein

Mailing Address 134 Broadway

City

Brooklyn

State

NY

Zip Code

11249

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian

Occupation

FR

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		20		2015

Transaction ID : SA11AI.63490

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Richard A. Fracasso

Mailing Address 193 Dayl Drive

City

Kensington

State

CT

Zip Code

06037

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

435.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		07		2015

Transaction ID : SA11AI.63403

Amount of Each Receipt this Period

180.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1680.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Elliot Ginsberg

Mailing Address 22 Stuart Drive

City

Bloomfield

State

CT

Zip Code

06002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Conn. Center for Adv. Technolo

Occupation

President

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

850.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2015

Transaction ID : SA11AI.63934

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

B. Elliot Ginsberg

Mailing Address 22 Stuart Drive

City

Bloomfield

State

CT

Zip Code

06002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Conn. Center for Adv. Technolo

Occupation

President

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

950.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		26		2015

Transaction ID : SA11AI.63979

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

C. Paul T. Glover

Mailing Address 648 Fern Street

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Consultant

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

550.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2015

Transaction ID : SA11AI.63914

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

450.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 14 OF 151

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Kevin P. Graff

Mailing Address 28 Evergreen Lane

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Lobbyist

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2015

Transaction ID : SA11AI.63528

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Kevin P. Graff

Mailing Address 28 Evergreen Lane

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Lobbyist

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

350.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2015

Transaction ID : SA11AI.63900

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

James M. Griffin

Mailing Address 259 Duncaster Road

City

Bloomfield

State

CT

Zip Code

06002

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Consulting Economist

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11AI.63991

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

600.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

James M. Griffin Jr.**A.**

Mailing Address 1040 Farmington Avenue

City

West Hartford

State

CT

Zip Code

06107

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

1750.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		25		2015

Transaction ID : SA11AI.64098

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Samuel C. Hamilton**B.**

Mailing Address 309 Kennedy Road

City

Manchester

State

CT

Zip Code

06040

FEC ID number of contributing
federal political committee.

C

Name of Employer

HEDCO

Occupation

Executive Director/CEO

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		29		2015

Transaction ID : SA11AI.63997

Amount of Each Receipt this Period

300.00

Full Name (Last, First, Middle Initial)

Jerry Harnik**C.**

Mailing Address 9 Walnut Hollow Lane

City

Lincroft

State

NJ

Zip Code

07738

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life Insurance Co.

Occupation

General Agent

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		11		2015

Transaction ID : SA11AI.63534

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

1550.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Jerry Hemmer

Mailing Address 12899 Stone Tower Loop

City

Fort Myers

State

FL

Zip Code

33913

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian

Occupation

General Agent

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		28		2015

Transaction ID : SA11AI.63545

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. Mary M. Heslin

Mailing Address 235 Kenyon Street

City

Hartford

State

CT

Zip Code

06105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Consultant

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

225.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
07		15		2015

Transaction ID : SA11AI.64117

Amount of Each Receipt this Period

50.00

Full Name (Last, First, Middle Initial)

C. Mary M. Heslin

Mailing Address 235 Kenyon Street

City

Hartford

State

CT

Zip Code

06105

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Consultant

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

275.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		25		2015

Transaction ID : SA11AI.63878

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

600.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Marc S. Levine

Mailing Address 30 Fawn Brook Drive

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing
federal political committee.

C

Name of Employer

Mark S. Levine Real Estate Interests

Occupation

Principal

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Transaction ID : SA11AI.63908

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

B. LLC, SACDA

Mailing Address 1150 Raritan Road

City

Cranford

State

NJ

Zip Code

07016

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		04		2015

Transaction ID : SA11AI.63986

Amount of Each Receipt this Period

1000.00

LLC treated as partnership for tax purposes; see
attribution below

Full Name (Last, First, Middle Initial)

C. Steven A. Ferrara

Mailing Address 1150 Raritan Road

City

Cranford

State

NJ

Zip Code

07016

FEC ID number of contributing
federal political committee.

C

Name of Employer

Northeast Planning Corporation

Occupation

President & CEO

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		29		2015

Transaction ID : SA11AI.63986.0

Amount of Each Receipt this Period

1000.00

Attribution from SACDA, LLC

[MEMO ITEM]**SUBTOTAL** of Receipts This Page (optional).....

1500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Robert R. Lydecker

A.

Mailing Address 117 Maple Avenue

City

Windsor

State

CT

Zip Code

06095

FEC ID number of contributing
federal political committee.

C

Name of Employer
Information RequestedOccupation
Information Requested

Receipt For: 2016

☐ Primary
☒ Other (specify)

General

Convention

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Transaction ID : SA11Al.63527

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Kevin M. Lynch

B.

Mailing Address 580D Mountain Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
None

Receipt For: 2016

☐ Primary
☒ Other (specify)

General

Convention

Election Cycle-to-Date

450.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		17		2015

Transaction ID : SA11Al.64106

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Kevin M. Lynch

C.

Mailing Address 580D Mountain Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing
federal political committee.

C

Name of Employer
NoneOccupation
None

Receipt For: 2016

☐ Primary
☒ Other (specify)

General

Convention

Election Cycle-to-Date

550.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		12		2015

Transaction ID : SA11Al.63562

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

450.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Kevin M. Lynch

Mailing Address 580D Mountain Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

650.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		26		2015

Transaction ID : SA11AI.63976

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Judith Lyons

Mailing Address 62 Cumberland Street

City

Hartford

State

CT

Zip Code

06106

FEC ID number of contributing
federal political committee.

C

Name of Employer

Retired

Occupation

Retired

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

250.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		25		2015

Transaction ID : SA11AI.63885

Amount of Each Receipt this Period

125.00

Full Name (Last, First, Middle Initial)

Edwin J. Maley Jr.

Mailing Address 4 Shawnee CT

City

Cromwell

State

CT

Zip Code

06416

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Maley Law Firm

Occupation

Attorney

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

300.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Transaction ID : SA11AI.63906

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

475.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 20 OF 151

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Bruce A. Maneeley

Mailing Address 65 Rye Street

City

South Windsor

State

CT

Zip Code

06074

FEC ID number of contributing
federal political committee.

C

Name of Employer

Maneeley's Banquet Facility

Occupation

Owner

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		28		2015

Transaction ID : SA11AI.63872

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Don Massey

Mailing Address 6 Elaine Drive

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Willow Brook Press

Occupation

Writer

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

450.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2015

Transaction ID : SA11AI.63904

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Patrick McCabe

Mailing Address 36 Trumbull Street

City

Hartford

State

CT

Zip Code

06103

FEC ID number of contributing
federal political committee.

C

Name of Employer

Capital Strategies Group

Occupation

Consultant

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

400.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2015

Transaction ID : SA11AI.63909

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 OF 151

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) Jean F. McDermott		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>17</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	08		17		2015
M M	/	D D	/	Y Y Y Y									
08		17		2015									
Mailing Address 30 Terry Road		Transaction ID : SA11AI.63929											
City Hartford	State CT	Zip Code 06105	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>50.00</td> </tr> </table>					50.00					
				50.00									
FEC ID number of contributing federal political committee. <div>C</div>													
Name of Employer Hartford Board of Education	Occupation Teacher												
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>350.00</td> </tr> </table>							350.00					
				350.00									

B. Full Name (Last, First, Middle Initial) Dwight Merriam		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>17</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		17		2015
M M	/	D D	/	Y Y Y Y									
07		17		2015									
Mailing Address 280 Trumbull Street		Transaction ID : SA11AI.63496											
City Hartford	State CT	Zip Code 06103	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>100.00</td> </tr> </table>					100.00					
				100.00									
FEC ID number of contributing federal political committee. <div>C</div>													
Name of Employer Robinson & Cole	Occupation Attorney												
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>350.00</td> </tr> </table>							350.00					
				350.00									

C. Full Name (Last, First, Middle Initial) Jeff Newman		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>28</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	08		28		2015
M M	/	D D	/	Y Y Y Y									
08		28		2015									
Mailing Address 1450 W 25th Street		Transaction ID : SA11AI.63540											
City Miami Beach	State FL	Zip Code 33140	Amount of Each Receipt this Period <table border="1"> <tr> <td colspan="4"></td> <td>500.00</td> </tr> </table>					500.00					
				500.00									
FEC ID number of contributing federal political committee. <div>C</div>													
Name of Employer NPC	Occupation President												
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date <table border="1"> <tr> <td colspan="4"></td> <td>500.00</td> </tr> </table>							500.00					
				500.00									

SUBTOTAL of Receipts This Page (optional).....	<table border="1"> <tr> <td colspan="4"></td> <td>650.00</td> </tr> </table>					650.00
				650.00		
TOTAL This Period (last page this line number only).....	<table border="1"> <tr> <td colspan="4"></td> <td></td> </tr> </table>					

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Mary L. Onidi

Mailing Address 61 Huckleberry Road

City

East hartford

State

CT

Zip Code

06118

FEC ID number of contributing
federal political committee.

C

Name of Employer

Marsh USA, Inc.

Occupation

Insurance

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

300.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		19		2015

Transaction ID : SA11AI.63892

Amount of Each Receipt this Period

150.00

Full Name (Last, First, Middle Initial)

B. Mitch Ostrove

Mailing Address 4 New King Street

City

White Plains

State

NY

Zip Code

10604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Ameritas

Occupation

Financial Advisor

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		10		2015

Transaction ID : SA11AI.63535

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Robert E. Patricelli

Mailing Address 77 Hartford Road

City

Simsbury

State

CT

Zip Code

06070

FEC ID number of contributing
federal political committee.

C

Name of Employer

Evolution Benefits, Inc.

Occupation

Executive

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11AI.64141

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2150.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Nathan M. Perlmutter

Mailing Address 95-25 Queens Blvd.

City

New York

State

NY

Zip Code

11374

FEC ID number of contributing
federal political committee.

C

Name of Employer

Guardian Life

Occupation

General Agent

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		27		2015

Transaction ID : SA11AI.63551

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

James A. Plumridge

Mailing Address 50 Church Street

City

Windsor Locks

State

CT

Zip Code

06096

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

400.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		30		2015

Transaction ID : SA11AI.63994

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Richard Pope

Mailing Address 22 Brycewood Drive

City

Dix Hills

State

NY

Zip Code

11746

FEC ID number of contributing
federal political committee.

C

Name of Employer

Applied Financial Group

Occupation

CEO/Financial Planner

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Transaction ID : SA11AI.63530

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2100.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Marguerite Rangel

Mailing Address 2439 Glencoe Avenue

City

Venice

State

CA

Zip Code

90291

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Financial Advisor

Receipt For: 2016

☐ Primary

☐ General

☒ Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
09 08 2015

Transaction ID : SA11AI.63537

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Anthony W. Ravosa Jr.

Mailing Address 77 Chatham Hill

City

South Glastonbury

State

CT

Zip Code

06073

FEC ID number of contributing
federal political committee.

C

Name of Employer

The Vince Group

Occupation

President

Receipt For: 2016

☐ Primary

☐ General

☒ Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
08 19 2015

Transaction ID : SA11AI.63894

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

C. Albert Rizzo

Mailing Address 96 Dickinson Road

City

South Glastonbury

State

CT

Zip Code

06073

FEC ID number of contributing
federal political committee.

C

Name of Employer

Rizzo Master Pools

Occupation

Owner/President

Receipt For: 2016

☐ Primary

☐ General

☒ Other (specify)

Convention

Election Cycle-to-Date

250.00

Date of Receipt

M M / D D / Y Y Y Y
07 09 2015

Transaction ID : SA11AI.64084

Amount of Each Receipt this Period

250.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2250.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

John F. Rossi

Mailing Address 43 Garfield Road

City

West hartford

State

CT

Zip Code

06119

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hartford HealthCareOccupation
Director

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		19		2015

Transaction ID : SA11AI.63493

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

James M. Ruel

Mailing Address 38 Enrico Road

City

Bolton

State

CT

Zip Code

06043

FEC ID number of contributing
federal political committee.

C

Name of Employer
Hartford Financial ServicesOccupation
Executive

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		07		2015

Transaction ID : SA11AI.63400

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Chet Schwartz

Mailing Address 140 Broadway

City

New York

State

NY

Zip Code

10005

FEC ID number of contributing
federal political committee.

C

Name of Employer
Guardian LifeOccupation
Insurance/Financial Services

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2015

Transaction ID : SA11AI.63529

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1350.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Charles B. Shepard

Mailing Address 45 Newberry Road

City

South Windsor

State

CT

Zip Code

06074

FEC ID number of contributing
federal political committee.

C

Name of Employer
NuWay Tobacco Co.Occupation
Executive

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		09		2015

Transaction ID : SA11AI.64087

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

Brett Silvers

Mailing Address 61 Ledyard Road

City

West Hartford

State

CT

Zip Code

06117

FEC ID number of contributing
federal political committee.

C

Name of Employer
World Business Capital, Inc.Occupation
Banker

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		13		2015

Transaction ID : SA11AI.63460

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

Louis Sproviero

Mailing Address PO Box 685

City

Brookfield

State

CT

Zip Code

06804

FEC ID number of contributing
federal political committee.

C

Name of Employer
21st Century ManagementOccupation
Business Management

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		20		2015

Transaction ID : SA11AI.63560

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3250.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

John F. Stafstrom Jr.

Mailing Address 420 Brooklawn Avenue

City

Bridgeport

State

CT

Zip Code

06604

FEC ID number of contributing
federal political committee.

C

Name of Employer

Pullman & Comley

Occupation

Attorney

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Transaction ID : SA11AI.63962

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

Shirley W. Steinmetz

Mailing Address 375 Brimfield Road

City

Wethersfield

State

CT

Zip Code

06109

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

225.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Transaction ID : SA11AI.64073

Amount of Each Receipt this Period

25.00

Full Name (Last, First, Middle Initial)

Shirley W. Steinmetz

Mailing Address 375 Brimfield Road

City

Wethersfield

State

CT

Zip Code

06109

FEC ID number of contributing
federal political committee.

C

Name of Employer

None

Occupation

None

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

275.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		30		2015

Transaction ID : SA11AI.64137

Amount of Each Receipt this Period

50.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1075.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Robert Stern

A.

Mailing Address 99 Terrell Farm Place

City

Cheshire

State

CT

Zip Code

06410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Business Owner

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

600.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		06		2015

Transaction ID : SA11AI.63381

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Robert Stern

B.

Mailing Address 99 Terrell Farm Place

City

Cheshire

State

CT

Zip Code

06410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Business Owner

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

700.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		07		2015

Transaction ID : SA11AI.63956

Amount of Each Receipt this Period

100.00

Full Name (Last, First, Middle Initial)

Robert Stern

C.

Mailing Address 99 Terrell Farm Place

City

Cheshire

State

CT

Zip Code

06410

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self-employed

Occupation

Business Owner

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

800.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		05		2015

Transaction ID : SA11AI.63839

Amount of Each Receipt this Period

100.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

300.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

PAGE 29 OF 151

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. David Stertzer

Mailing Address 10689 Alliwells Court

City

Oakton

State

VA

Zip Code

22124

FEC ID number of contributing
federal political committee.

C

Name of Employer

AALU

Occupation

CEO

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		27		2015

Transaction ID : SA11AI.63549

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Jeffrey Strunk

Mailing Address 3231 Rittenhouse Street, NW

City

Washington

State

DC

Zip Code

20015

FEC ID number of contributing
federal political committee.

C

Name of Employer

Forbes Tate

Occupation

Senior VP

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		01		2015

Transaction ID : SA11AI.63465

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

C. Richard Sullivan

Mailing Address 1306 Rand Drive

City

Raleigh

State

NC

Zip Code

27608

FEC ID number of contributing
federal political committee.

C

Name of Employer

Capitol Counsel LLC

Occupation

Owner

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Transaction ID : SA11AI.63761

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

2000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Edward Tafaro

A.

Mailing Address 1 International Blvd

City

Mahwah

State

NJ

Zip Code

07495

FEC ID number of contributing
federal political committee.

C

Name of Employer
Exceptional Risk AdvisorsOccupation
Insurance

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		03		2015

Transaction ID : SA11AI.63518

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Allan B. Taylor

B.

Mailing Address 238 Whitney Street

City

Hartford

State

CT

Zip Code

06105

FEC ID number of contributing
federal political committee.

C

Name of Employer
City of HartfordOccupation
Attorney

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2015

Transaction ID : SA11AI.63905

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)

Richard Thomas

C.

Mailing Address 914 South Carolina SE

City

Washington

State

DC

Zip Code

20003

FEC ID number of contributing
federal political committee.

C

Name of Employer
Monument Policy GroupOccupation
Senior VP

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		29		2015

Transaction ID : SA11AI.63756

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

1500.00

X	11a		11b		11c		11d		
	12		13a		13b		14		15

NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

John Wolfson

Mailing Address 1 Constitution Plaza

City

Hartford

State

CT

Zip Code

06103

FEC ID number of contributing
federal political committee.

C

Name of Employer
Feiner Wolfson LLCOccupation
Attorney

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

250.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		18		2015

Transaction ID : SA11Al.63911

Amount of Each Receipt this Period

250.00

Full Name (Last, First, Middle Initial)

B. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C. Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐

Primary

☐

General

☐

Other (specify)

Election Cycle-to-Date

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

250.00

47755.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
 Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

ABBVIE POLITICAL ACTION COMMITTEE

Mailing Address 1 N. WAUKEGAN ROAD

City

NORTH CHICAGO

State

IL

Zip Code

60064

FEC ID number of contributing
federal political committee.

C C00536573

Name of Employer

Occupation

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		09		2015

Transaction ID : SA11C.63767

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

AEGON USA, LLC/TRANSAMERICA CORPORATION PAC

Mailing Address 1001 PENNSYLVANIA AVENUE, NW
SUITE 500A SOUTH

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.

C C00236414

Name of Employer

Occupation

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

3500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		28		2015

Transaction ID : SA11C.64122

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

AFLAC INCORPORATED POLITICAL ACTION COMMITTEE AFLACPAC

Mailing Address WORLDWIDE HEADQUARTERS

City

COLUMBUS

State

GA

Zip Code

31999

FEC ID number of contributing
federal political committee.

C C00034157

Name of Employer

Occupation

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		29		2015

Transaction ID : SA11C.64181

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) ALTRIA GROUP INC. POLITICAL ACTION COMMITTEE		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>08</td> <td></td> <td>04</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	08		04		2015
M M	/	D D	/	Y Y Y Y									
08		04		2015									
Mailing Address 101 Constitution Ave NW Suite 400W		Transaction ID : SA11C.63952											
City Washington	State DC	Zip Code 20001	Amount of Each Receipt this Period <table border="1"> <tr> <td>1500.00</td> </tr> </table>	1500.00									
1500.00													
FEC ID number of contributing federal political committee. C C00089136													
Name of Employer		Occupation											
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Election Cycle-to-Date <table border="1"> <tr> <td>1500.00</td> </tr> </table>		1500.00									
1500.00													
B. Full Name (Last, First, Middle Initial) ALTRIA GROUP INC. POLITICAL ACTION COMMITTEE		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>09</td> <td></td> <td>28</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	09		28		2015
M M	/	D D	/	Y Y Y Y									
09		28		2015									
Mailing Address 101 Constitution Ave NW Suite 400W		Transaction ID : SA11C.64123											
City Washington	State DC	Zip Code 20001	Amount of Each Receipt this Period <table border="1"> <tr> <td>1000.00</td> </tr> </table>	1000.00									
1000.00													
FEC ID number of contributing federal political committee. C C00089136													
Name of Employer		Occupation											
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Election Cycle-to-Date <table border="1"> <tr> <td>2500.00</td> </tr> </table>		2500.00									
2500.00													
C. Full Name (Last, First, Middle Initial) AMERICAN ACADEMY OF FAMILY PHYSICIANS POLITICAL ACTION COMMITTEE		Date of Receipt <table border="1"> <tr> <td>M M</td> <td>/</td> <td>D D</td> <td>/</td> <td>Y Y Y Y</td> </tr> <tr> <td>07</td> <td></td> <td>30</td> <td></td> <td>2015</td> </tr> </table>		M M	/	D D	/	Y Y Y Y	07		30		2015
M M	/	D D	/	Y Y Y Y									
07		30		2015									
Mailing Address 2021 Massachusetts Ave. NW		Transaction ID : SA11C.63748											
City Washington	State DC	Zip Code 20036	Amount of Each Receipt this Period <table border="1"> <tr> <td>2500.00</td> </tr> </table>	2500.00									
2500.00													
FEC ID number of contributing federal political committee. C C00411553													
Name of Employer		Occupation											
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention		Election Cycle-to-Date <table border="1"> <tr> <td>2500.00</td> </tr> </table>		2500.00									
2500.00													
SUBTOTAL of Receipts This Page (optional).....		<table border="1"> <tr> <td>5000.00</td> </tr> </table>		5000.00									
5000.00													
TOTAL This Period (last page this line number only).....		<table border="1"> <tr> <td></td> </tr> </table>											

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

AMERICAN ASSOCIATION FOR JUSTICE

Mailing Address 777 6TH STREET NW STE 200

City
WASHINGTONState Zip Code
DC 20001FEC ID number of contributing
federal political committee.

C C70003017

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		16		2015

Transaction ID : SA11C.63773

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

AMERICAN ASSOCIATION OF NURSE ANESTHETISTSMailing Address 412 First Street, S.E.
Suite 12City
WashingtonState Zip Code
DC 20003FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		25		2015

Transaction ID : SA11C.64124

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

AMERICAN FEDERATION OF GOVERNMENT EMPLOYEES

Mailing Address 80 F STREET, N.W.

City
WASHINGTONState Zip Code
DC 20001FEC ID number of contributing
federal political committee.

C C70000104

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		30		2015

Transaction ID : SA11C.64180

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)
 AMERICAN FEDERATION OF STATE COUNTY & MUNICIPAL EMPLOYEES - P E O P L E, QUALIFIED

A. Mailing Address 1625 L STREET NW

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing
federal political committee.

C C00011114

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y
 08 / 19 / 2015

Transaction ID : SA11C.63895

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)
 AMERICAN FEDERATION OF TEACHERS COMMITTEE ON POLITICAL EDUCATION

Mailing Address 555 NEW JERSEY AVENUE N W

City	State	Zip Code
WASHINGTON	DC	20001

FEC ID number of contributing
federal political committee.

C C00028860

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
 09 / 28 / 2015

Transaction ID : SA11C.64125

Amount of Each Receipt this Period

5000.00

C. Full Name (Last, First, Middle Initial)
 AMERICAN INSTITUTE OF CERTIFIED PUBLIC ACCOUNTANTS POLITICAL ACTION COMMITTEE

Mailing Address Palladian 1
 220 Leigh Farm Rd

City	State	Zip Code
Durham	NC	27707

FEC ID number of contributing
federal political committee.

C C00077321

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

3000.00

Date of Receipt

M M / D D / Y Y Y Y
 09 / 09 / 2015

Transaction ID : SA11C.63769

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

9000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
AMERICAN SENIORS HOUSING ASSOCIATION (SENIORS HOUSING PAC)

Mailing Address 5100 Wisconsin Ave. NW
 Suite 307

City	State	Zip Code
Washington	DC	20016

FEC ID number of contributing federal political committee. **C** C00325332

Name of Employer Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 17 / 2015

Transaction ID : SA11C.63789

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)
AMGEN INC. POLITICAL ACTION COMMITTEE

Mailing Address 601 13th Street, NW
 12th Floor

City	State	Zip Code
Washington	DC	20005

FEC ID number of contributing federal political committee. **C** C00251876

Name of Employer Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 18 / 2015

Transaction ID : SA11C.63774

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
ASSOCIATION FOR ADVANCED LIFE UNDERWRITING POLITICAL ACTION COMMITTEE (AALU PAC)

Mailing Address 2901 Telestar Court 4th Floor

City	State	Zip Code
Falls Church	VA	22042

FEC ID number of contributing federal political committee. **C** C00447565

Name of Employer Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 01 / 2015

Transaction ID : SA11C.63840

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

AT&T CORP POLITICAL ACTION COMMITTEE (AT&T PAC)

Mailing Address 295 NORTH MAPLE AVENUE

City	State	Zip Code
BASKING RIDGE	NJ	07920

FEC ID number of contributing
federal political committee.**C** C00185124

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

3000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2015

Transaction ID : SA11C.63775

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

BIOGEN, INC. POLITICAL ACTION COMMITTEE A.K.A. 'BIOGEN PAC'

Mailing Address 225 BINNEY STREET

City	State	Zip Code
CAMBRIDGE	MA	02142

FEC ID number of contributing
federal political committee.**C** C00390351

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		22		2015

Transaction ID : SA11C.64069

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

BLANK ROME PAC

Mailing Address 600 NEW HAMPSHIRE AVENUE, NW

City	State	Zip Code
WASHINGTON	DC	20037

FEC ID number of contributing
federal political committee.**C** C00150797

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		30		2015

Transaction ID : SA11C.63749

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

3000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

CARDINAL HEALTH INC. PAC AKA CARDINAL HEALTH COMPANIES PAC**A.**

Mailing Address 7000 CARDINAL PLACE

City	State	Zip Code
DUBLIN	OH	43017

FEC ID number of contributing
federal political committee.**C** C00332833

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		15		2015

Transaction ID : SA11C.64075

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

CITIGROUP INC POL ACTION CMTE-FEDERAL (CITIGROUP PAC-FEDERAL) FKA SALOMON SMITH BARNEY INC**B.**

Mailing Address 1101 PENNSYLVANIA AVE NW STE 1000

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing
federal political committee.**C** C00008474

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

3000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		30		2015

Transaction ID : SA11C.64187

Amount of Each Receipt this Period

2000.00

Full Name (Last, First, Middle Initial)

CONNECTICUT BANKERS ASSOCIATION POLITICAL ACTION COMMITTEE (CBA FED PAC)**C.**

Mailing Address 450 CHURCH ST.

City	State	Zip Code
HARTFORD	CT	06103

FEC ID number of contributing
federal political committee.**C** C00108605

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		17		2015

Transaction ID : SA11C.63960

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional).....

4500.00

TOTAL This Period (last page this line number only).....

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

COUNCIL OF INSURANCE AGENTS & BROKERS POLITICAL ACTION COMMITTEE; THE

A.

Mailing Address 701 PENNSYLVANIA AVE NW SUITE 750

City

WASHINGTON

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.**C** C00039578

Name of Employer

Occupation

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 29 / 2015**Transaction ID : SA11C.64188**

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

CREDIT UNION LEGISLATIVE ACTION COUNCIL OF CUNA**B.**

Mailing Address P O BOX 576

City

WASHINGTON

State

DC

Zip Code

20044

FEC ID number of contributing
federal political committee.**C** C00007880

Name of Employer

Occupation

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 05 / 2015**Transaction ID : SA11C.63837**

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

CT WORKING FAMILIES FEDERAL PAC D/B/A TAKE BACK CONGRESS CT**C.**

Mailing Address 621 FARMINGTON AVENUE

City

HARTFORD

State

CT

Zip Code

06105

FEC ID number of contributing
federal political committee.**C** C00428649

Name of Employer

Occupation

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

242.16

Date of Receipt

M M / D D / Y Y Y Y Y Y
08 / 26 / 2015**Transaction ID : SA11C.63563**

Amount of Each Receipt this Period

242.16

In-kind - Food and beverage

SUBTOTAL of Receipts This Page (optional).....

3742.16

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
CT WORKING FAMILIES FEDERAL PAC D/B/A TAKE BACK CONGRESS CT

Mailing Address 621 FARMINGTON AVENUE

City State Zip Code
HARTFORD CT 06105

FEC ID number of contributing federal political committee. **C** C00428649

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date
506.16

Date of Receipt

M M / D D / Y Y Y Y
08 26 2015

Transaction ID : SA11C.63565

Amount of Each Receipt this Period

264.00

In-kind - staff time for event

B. Full Name (Last, First, Middle Initial)
DARDEN RESTAURANTS, INC. EMPLOYEES GOOD GOVERNMENT FUND

Mailing Address 1000 Darden Center Drive

City State Zip Code
Orlando FL 32837

FEC ID number of contributing federal political committee. **C** C00108282

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date
5000.00

Date of Receipt

M M / D D / Y Y Y Y
07 29 2015

Transaction ID : SA11C.63751

Amount of Each Receipt this Period

5000.00

C. Full Name (Last, First, Middle Initial)
DEPOSITORY TRUST AND CLEARING CORPORATION PAC - DTCC PAC; THE

Mailing Address 601 13TH ST NW SUITE 580 SOUTH

City State Zip Code
WASHINGTON DC 20005

FEC ID number of contributing federal political committee. **C** C00497917

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date
5000.00

Date of Receipt

M M / D D / Y Y Y Y
09 17 2015

Transaction ID : SA11C.63776

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6264.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial) DRIVE POLITICAL FUND		Date of Receipt M M / D D / Y Y Y Y Y Y 08 / 27 / 2015
Mailing Address 25 Louisiana Avenue, N.W.		Transaction ID : SA11C.63764
City Washington	State DC	
FEC ID number of contributing federal political committee. C C00032979		Amount of Each Receipt this Period 5000.00
Name of Employer	Occupation	
Receipt For: 2016 <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify)	Election Cycle-to-Date 10000.00	

Full Name (Last, First, Middle Initial) DYKEMA GOSSETT FEDERAL PAC		Date of Receipt M M / D D / Y Y Y Y Y Y 09 / 16 / 2015
Mailing Address 201 TOWNSEND STREET SUITE 900		Transaction ID : SA11C.63777
City LANSING	State MI	
FEC ID number of contributing federal political committee. C C00342113		Amount of Each Receipt this Period 1000.00
Name of Employer	Occupation	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 2500.00	

Full Name (Last, First, Middle Initial) ELI LILLY AND COMPANY POLITICAL ACTION COMMITTEE		Date of Receipt M M / D D / Y Y Y Y Y Y 07 / 08 / 2015
Mailing Address LILLY CORPORATE CENTER		Transaction ID : SA11C.64119
City INDIANAPOLIS	State IN	
FEC ID number of contributing federal political committee. C C00082792		Amount of Each Receipt this Period 1500.00
Name of Employer	Occupation	
Receipt For: 2016 <input type="checkbox"/> Primary <input type="checkbox"/> General <input checked="" type="checkbox"/> Other (specify) Convention	Election Cycle-to-Date 1500.00	

SUBTOTAL of Receipts This Page (optional).....	7500.00
TOTAL This Period (last page this line number only).....	

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

GENERAL DYNAMICS VOLUNTARY POLITICAL CONTRIBUTION PLAN

A.

Mailing Address 3190 FAIRVIEW PARK DRIVE

City	State	Zip Code
FALLS CHURCH	VA	22042

FEC ID number of contributing federal political committee.

C C00078451

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2015

Transaction ID : SA11C.63778

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

GENERAL DYNAMICS VOLUNTARY POLITICAL CONTRIBUTION PLAN

B.

Mailing Address 3190 FAIRVIEW PARK DRIVE

City	State	Zip Code
FALLS CHURCH	VA	22042

FEC ID number of contributing federal political committee.

C C00078451

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

4500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2015

Transaction ID : SA11C.63779

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

GENERAL ELECTRIC COMPANY POLITICAL ACTION COMMITTEE

C.

Mailing Address 1299 PENNSYLVANIA AVE NW STE 1100

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing federal political committee.

C C00024869

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

3500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		15		2015

Transaction ID : SA11C.64077

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

3500.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

GLAXOSMITHKLINE LLC PAC (GSK PAC)

Mailing Address FIVE MOORE DRIVE

PO BOX 13358

City

RES. TRIANGLE PARK

State

NC

Zip Code

27709

FEC ID number of contributing
federal political committee.**C** C00199703

Name of Employer

Occupation

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2015

Transaction ID : SA11C.64134

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

GLOVER PARK GROUP LLC PAC (GLOVER PARK GROUP PAC)

Mailing Address 700 13TH STREET, NW

SUITE 600

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.**C** C00466094

Name of Employer

Occupation

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		17		2015

Transaction ID : SA11C.64078

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

GOOGLE INC. NETPAC

Mailing Address 1101 NEW YORK AVENUE, NW

SECOND FLOOR

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.**C** C00428623

Name of Employer

Occupation

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

4000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2015

Transaction ID : SA11C.64126

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional).....

4500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. HARDWOOD FEDERATION PAC INC

Mailing Address 1111 Nineteenth Street NW;
Suite 800

City	State	Zip Code
Washington	DC	20036

FEC ID number of contributing federal political committee.

C C00396671

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2015

Transaction ID : SA11C.63780

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. HEINEKEN USA INC GOOD GOVERNMENT COMMITTEE HUSA GOOD GOVERNMENT COMMITTEE (ABBREVIATION)

Mailing Address 360 HAMILTON AVENUE SUITE 1103

City	State	Zip Code
WHITE PLAINS	NY	10601

FEC ID number of contributing federal political committee.

C C00358234

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

2500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
07		09		2015

Transaction ID : SA11C.64121

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

C. HUMANA INC. POLITICAL ACTION COMMITTEE

Mailing Address 975 F STREET, NW
SUITE 550

City	State	Zip Code
WASHINGTON	DC	20004

FEC ID number of contributing federal political committee.

C C00271007

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		17		2015

Transaction ID : SA11C.63781

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
HUNTINGTON INGALLS INDUSTRIES POLITICAL ACTION COMMITTEE (SHIPPAC)

Mailing Address 300 M STREET S.E.
SUITE 350

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C C00325092

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y
07 02 2015

Transaction ID : SA11C.63406

Amount of Each Receipt this Period

1500.00

B. Full Name (Last, First, Middle Initial)
INDEPENDENT INSURANCE AGENTS OF AMERICA INC POLITICAL ACTION COMMITTEE (INSURPAC)

Mailing Address 412 FIRST STREET SE SUITE 300

City State Zip Code
WASHINGTON DC 20003

FEC ID number of contributing
federal political committee.

C C00022343

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

4000.00

Date of Receipt

M M / D D / Y Y Y Y
09 30 2015

Transaction ID : SA11C.64189

Amount of Each Receipt this Period

1000.00

C. Full Name (Last, First, Middle Initial)
INTERNATIONAL BROTHERHOOD OF ELECTRICAL WORKERS POLITICAL ACTION COMMITTEE

Mailing Address 900 Seventh St, NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C C00027342

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
08 17 2015

Transaction ID : SA11C.63917

Amount of Each Receipt this Period

5000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

7500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

INTERNATIONAL UNION OF OPERATING ENGINEERS

A.

Mailing Address 1125 17TH STREET NW

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C C70002118

Name of Employer

Occupation

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		30		2015

Transaction ID : SA11C.64190

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

INVESTMENT COMPANY INSTITUTE POLITICAL ACTION COMMITTEE (ICI PAC)

B.

Mailing Address 1401 H STREET NW SUITE 1200

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.

C C00105981

Name of Employer

Occupation

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		29		2015

Transaction ID : SA11C.64191

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

LOCKHEED MARTIN EMPLOYEES POLITICAL ACTION COMMITTEE

C.

Mailing Address 1725 JEFFERSON DAVIS HIGHWAY
CRYSTAL SQUARE TWO SUITE 300

City

ARLINGTON

State

VA

Zip Code

22202

FEC ID number of contributing
federal political committee.

C C00303024

Name of Employer

Occupation

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

5000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		22		2015

Transaction ID : SA11C.64066

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

7500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

LOCKHEED MARTIN EMPLOYEES POLITICAL ACTION COMMITTEE

Mailing Address 1725 JEFFERSON DAVIS HIGHWAY

CRYSTAL SQUARE TWO SUITE 300

City	State	Zip Code
ARLINGTON	VA	22202

FEC ID number of contributing federal political committee.

C C00303024

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

6500.00

Date of Receipt

M M / D D / Y Y Y Y
08 / 17 / 2015

Transaction ID : SA11C.63961

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

MASSACHUSETTS MUTUAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1295 STATE STREET

City	State	Zip Code
SPRINGFIELD	MA	01111

FEC ID number of contributing federal political committee.

C C00118943

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 28 / 2015

Transaction ID : SA11C.64127

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

MEDTRONIC INC. MEDICAL TECHNOLOGY FUND

Mailing Address 1420 New York Avenue NW Suite 600

City	State	Zip Code
Washington	DC	20005

FEC ID number of contributing federal political committee.

C C00311878

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

2000.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11C.64192

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

METROPOLITAN LIFE INSURANCE COMPANY (METLIFE) EMPLOYEES' POLITICAL PARTICIPATION FUND A

A.

Mailing Address ONE MADISON AVENUE

City

NEW YORK

State

NY

Zip Code

10010

FEC ID number of contributing
federal political committee.

C C00040923

Name of Employer

Occupation

Receipt For: 2016

☐ Primary
☐ Other (specify)
☒ General

Election Cycle-to-Date

10000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		28		2015

Transaction ID : SA11C.64128

Amount of Each Receipt this Period

5000.00

B.

Full Name (Last, First, Middle Initial)

MOTION PICTURE ASSOCIATION OF AMERICA INC POLITICAL ACTION COMMITTEE

Mailing Address 1600 EYE STREET NW

City

WASHINGTON

State

DC

Zip Code

20006

FEC ID number of contributing
federal political committee.

C C00139519

Name of Employer

Occupation

Receipt For: 2016

☐ Primary
☒ Other (specify)

☐ General
 Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		27		2015

Transaction ID : SA11C.63765

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

NATIONAL AIR TRAFFIC CONTROLLERS ASSOCIATION POLITICAL ACTION COMMITTEE (AKA NATCA PAC)

Mailing Address 1150 17TH STREET NW SUITE 701

City

WASHINGTON

State

DC

Zip Code

20036

FEC ID number of contributing
federal political committee.

C C00238725

Name of Employer

Occupation

Receipt For: 2016

☐ Primary
☒ Other (specify)

☐ General
 Convention

Election Cycle-to-Date

4500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		28		2015

Transaction ID : SA11C.64130

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

7000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)
 NATIONAL ASSOCIATION OF BROADCASTERS POLITICAL ACTION COMMITTEE (NABPAC)

A.

Mailing Address 1771 N Street NW

City	State	Zip Code
Washington	DC	20036

FEC ID number of contributing
federal political committee.

C C00009985

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11C.64193

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)
 NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS INC. POLITICAL ACTION COMMITTEE

B.

Mailing Address 1875 Eye Street NW
 Suite 600

City	State	Zip Code
Washington	DC	20006

FEC ID number of contributing
federal political committee.

C C00303339

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 16 / 2015

Transaction ID : SA11C.64080

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)
 NATIONAL ASSOCIATION OF REAL ESTATE INVESTMENT TRUSTS INC. POLITICAL ACTION COMMITTEE

C.

Mailing Address 1875 Eye Street NW
 Suite 600

City	State	Zip Code
Washington	DC	20006

FEC ID number of contributing
federal political committee.

C C00303339

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 25 / 2015

Transaction ID : SA11C.64131

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)
 NATIONAL BEER WHOLESALERS' ASSOCIATION POLITICAL ACTION COMMITTEE (NBWA PAC)

A. Mailing Address 1100 SOUTH WASHINGTON STREET

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing
federal political committee.

C C00144766

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

4000.00

Date of Receipt

MM / DD / YYYY
 08 / 06 / 2015

Transaction ID : SA11C.63758

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)
B. NATIONAL MULTI HOUSING COUNCIL POLITICAL ACTION COMMITTEE

Mailing Address 1850 M Street NW Suite 540

City	State	Zip Code
Washington	DC	20036

FEC ID number of contributing
federal political committee.

C C00130773

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

2500.00

Date of Receipt

MM / DD / YYYY
 09 / 17 / 2015

Transaction ID : SA11C.63782

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)
C. NATIONAL RURAL LETTER CARRIERS' ASSOCIATION POLITICAL ACTION COMMITTEE

Mailing Address 1630 DUKE STREET 4TH FLOOR

City	State	Zip Code
ALEXANDRIA	VA	22314

FEC ID number of contributing
federal political committee.

C C00072025

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

1000.00

Date of Receipt

MM / DD / YYYY
 09 / 18 / 2015

Transaction ID : SA11C.63783

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

5000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS

 Use separate schedule(s)
 for each category of the
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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

NATIONAL STONE, SAND & GRAVEL ASSOCIATION ROCKPAC

Mailing Address 1605 King Street

City	State	Zip Code
Alexandria	VA	22314

FEC ID number of contributing federal political committee.

C C00089458

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		11		2015

Transaction ID : SA11C.63945

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

NATIONWIDE MUTUAL INSURANCE COMPANY FINANCIAL & INVESTMENTS POLITICAL ACTION COMMITTEE

Mailing Address ONE NATIONWIDE PLAZA, 1-32-301

City	State	Zip Code
COLUMBUS	OH	43215

FEC ID number of contributing federal political committee.

C C00406215

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

1500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		28		2015

Transaction ID : SA11C.63766

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

NEA FUND FOR CHILDREN AND PUBLIC EDUCATION; THE (FKA NEAPAC)

Mailing Address 1201 16TH STREET NW #421

City	State	Zip Code
WASHINGTON	DC	20036

FEC ID number of contributing federal political committee.

C C00003251

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

2000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		26		2015

Transaction ID : SA11C.63964

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

NEW YORK LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 51 MADISON AVENUE (910)

City

NEW YORK

State

NY

Zip Code

10010

FEC ID number of contributing
federal political committee.**C** C00158881

Name of Employer

Occupation

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 15 2015

Transaction ID : SA11C.63841

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

ORACLE AMERICA, INC. POLITICAL ACTION COMMITTEE (ORACLE PAC)Mailing Address 1015 15th St. NW Suite 200
Suite 200

City

Washington

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.**C** C00323048

Name of Employer

Occupation

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1780.00

Date of Receipt

M M / D D / Y Y Y Y Y
08 20 2015

Transaction ID : SA11C.63763

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

ORBITAL ATK INC. POLITICAL ACTION COMMITTEEMailing Address 1300 WILSON BLVD
SUITE 1100

City

ARLINGTON

State

VA

Zip Code

22209

FEC ID number of contributing
federal political committee.**C** C00250209

Name of Employer

Occupation

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
09 11 2015

Transaction ID : SA11C.63770

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional).....

8000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)
PACIFIC LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 700 Newport Center Drive

City State Zip Code
Newport Beach CA 92660

FEC ID number of contributing federal political committee. **C** C00068528

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date
7500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 06 2015

Transaction ID : SA11C.64120

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)
PETROLEUM MARKETERS ASSOCIATION OF AMERICAN SMALL BUSINESS COMMITTEE

Mailing Address 1901 North Fort Myer Drive
Suite 500

City State Zip Code
Arlington VA 22209

FEC ID number of contributing federal political committee. **C** C00035204

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date
4500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 10 2015

Transaction ID : SA11C.63772

Amount of Each Receipt this Period

3000.00

Full Name (Last, First, Middle Initial)
PFIZER INC. PAC

Mailing Address 235 EAST 42ND STREET

City State Zip Code
NEW YORK NY 10017

FEC ID number of contributing federal political committee. **C** C00016683

Name of Employer Occupation

Receipt For: 2016
☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date
4000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
07 29 2015

Transaction ID : SA11C.63752

Amount of Each Receipt this Period

2500.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

8500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

PFIZER INC. PAC

A.

Mailing Address 235 EAST 42ND STREET

City

NEW YORK

State

NY

Zip Code

10017

FEC ID number of contributing
federal political committee.

C C00016683

Name of Employer

Occupation

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2015

Transaction ID : SA11C.64132

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

PFIZER INC. PAC

B.

Mailing Address 235 EAST 42ND STREET

City

NEW YORK

State

NY

Zip Code

10017

FEC ID number of contributing
federal political committee.

C C00016683

Name of Employer

Occupation

Receipt For: 2016

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

6000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		25		2015

Transaction ID : SA11C.64133

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

PHOENIX COMPANIES, INC. - PAC FEDERAL, THE

C.

Mailing Address One American Row

City

Hartford

State

CT

Zip Code

06102

FEC ID number of contributing
federal political committee.

C C00168203

Name of Employer

Occupation

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		30		2015

Transaction ID : SA11C.64138

Amount of Each Receipt this Period

2000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS

A.

Mailing Address 317 MASSACHUSETTS AVENUE NE

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing
federal political committee.

C C00343137

Name of Employer

Occupation

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2015

Transaction ID : SA11C.63784

Amount of Each Receipt this Period

3500.00

B.

Full Name (Last, First, Middle Initial)

POLITICAL ACTION COMMITTEE OF THE AMERICAN ASSOCIATION OF ORTHOPAEDIC SURGEONS

Mailing Address 317 MASSACHUSETTS AVENUE NE

City

WASHINGTON

State

DC

Zip Code

20002

FEC ID number of contributing
federal political committee.

C C00343137

Name of Employer

Occupation

Receipt For: 2016

☐ Primary☒ General☐ Other (specify)

Election Cycle-to-Date

5500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2015

Transaction ID : SA11C.63785

Amount of Each Receipt this Period

500.00

C.

Full Name (Last, First, Middle Initial)

POLSINELLI SHUGHART PC PAC

Mailing Address 700 WEST 47TH STREET
SUITE 1000

City

KANSAS CITY

State

MO

Zip Code

64112

FEC ID number of contributing
federal political committee.

C C00445981

Name of Employer

Occupation

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
09 / 16 / 2015

Transaction ID : SA11C.63786

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

5000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input checked="" type="checkbox"/> 11c 13b	<input type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial)
PRICewaterhouseCOOPERS POLITICAL ACTION COMMITTEE II

Mailing Address 1900 K STREET NW SUITE 900

City	State	Zip Code
WASHINGTON	DC	20006

FEC ID number of contributing federal political committee.

C C00232173

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Transaction ID : SA11C.63753

Amount of Each Receipt this Period

2500.00

B. Full Name (Last, First, Middle Initial)
PRICewaterhouseCOOPERS POLITICAL ACTION COMMITTEE II

Mailing Address 1900 K STREET NW SUITE 900

City	State	Zip Code
WASHINGTON	DC	20006

FEC ID number of contributing federal political committee.

C C00232173

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

7500.00

Date of Receipt

M M / D D / Y Y Y Y
09 / 30 / 2015

Transaction ID : SA11C.64194

Amount of Each Receipt this Period

2500.00

C. Full Name (Last, First, Middle Initial)
PRINCIPAL LIFE INSURANCE COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 711 HIGH ST/TAX DEPT

City	State	Zip Code
DES MOINES	IA	50392

FEC ID number of contributing federal political committee.

C C00128918

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
07 / 31 / 2015

Transaction ID : SA11C.63754

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6000.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

PRUDENTIAL FINANCIAL INC. POLITICAL ACTION COMMITTEE (AKA - PRUDENTIAL PAC)

A.

Mailing Address 751 Broad Street

3RD FLOOR PRUDENTIAL PLAZA

City

State

Zip Code

Newark

NJ

07102

FEC ID number of contributing
federal political committee.

C C00127779

Name of Employer

Occupation

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

2500.00

Date of Receipt

M M / D D / Y Y Y Y Y

07

31

2015

Transaction ID : SA11C.63755

Amount of Each Receipt this Period

2500.00

B.

Full Name (Last, First, Middle Initial)

PULLMAN & COMLEY POLITICAL ACTION COMMITTEE

Mailing Address 850 MAIN STREET

PO BOX 7006

City

State

Zip Code

BRIDGEPORT

CT

06601

FEC ID number of contributing
federal political committee.

C C00230201

Name of Employer

Occupation

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y

08

17

2015

Transaction ID : SA11C.63963

Amount of Each Receipt this Period

1000.00

C.

Full Name (Last, First, Middle Initial)

REAL ESTATE ROUNDTABLE POLITICAL ACTION COMMITTEE (REALPAC)

Mailing Address 801 Pennsylvania Avenue

Suite 720

City

State

Zip Code

Washington

DC

20004

FEC ID number of contributing
federal political committee.

C C00033779

Name of Employer

Occupation

Receipt For: 2016

☐ Primary☐ General☒ Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y

07

24

2015

Transaction ID : SA11C.64288

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

4500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

REALTORS POLITICAL ACTION COMMITTEE**A.**

Mailing Address 430 NORTH MICHIGAN AVE

City

CHICAGO

State

IL

Zip Code

60611

FEC ID number of contributing
federal political committee.**C** C00030718

Name of Employer

Occupation

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		17		2015

Transaction ID : SA11C.63916

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

REALTORS POLITICAL ACTION COMMITTEE**B.**

Mailing Address 430 NORTH MICHIGAN AVE

City

CHICAGO

State

IL

Zip Code

60611

FEC ID number of contributing
federal political committee.**C** C00030718

Name of Employer

Occupation

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

2000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
09		16		2015

Transaction ID : SA11C.63787

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

TEACHERS INSURANCE ANNUITY ASSOC OF AMERICA COLLEGE RETIREMENT EQUITIES FUND PAC TIAA-CREF

C.Mailing Address 1101 Pennsylvania Avenue NW
Suite 800

City

Washington

State

DC

Zip Code

20004

FEC ID number of contributing
federal political committee.**C** C00431361

Name of Employer

Occupation

Receipt For: 2016

☐

Primary

☒

General

☐

Other (specify)

Election Cycle-to-Date

5000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y Y
08		07		2015

Transaction ID : SA11C.63759

Amount of Each Receipt this Period

1500.00

SUBTOTAL of Receipts This Page (optional).....

3500.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:

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(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

TEACHERS INSURANCE ANNUITY ASSOC OF AMERICA COLLEGE RETIREMENT EQUITIES FUND PAC TIAA-CREF

A.

Mailing Address 1101 Pennsylvania Avenue NW
Suite 800

City	State	Zip Code
Washington	DC	20004

FEC ID number of contributing
federal political committee.

C C00431361

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

7000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
08		07		2015

Transaction ID : SA11C.63760

Amount of Each Receipt this Period

2000.00

B.

Full Name (Last, First, Middle Initial)

TEACHERS INSURANCE ANNUITY ASSOC OF AMERICA COLLEGE RETIREMENT EQUITIES FUND PAC TIAA-CREF

Mailing Address 1101 Pennsylvania Avenue NW
Suite 800

City	State	Zip Code
Washington	DC	20004

FEC ID number of contributing
federal political committee.

C C00431361

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

8500.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		30		2015

Transaction ID : SA11C.64195

Amount of Each Receipt this Period

1500.00

C.

Full Name (Last, First, Middle Initial)

TOYOTA MOTOR NORTH AMERICA INC PAC AKA TOYOTA/LEXUS PAC

Mailing Address 601 THIRTEENTH STREET NW
STE 910 S

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing
federal political committee.

C C00542365

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M M	/	D D D	/	Y Y Y Y Y
09		23		2015

Transaction ID : SA11C.63844

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

4500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 11d
12 13a 13b 14 15

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)
 TRANSPORTATION TRADES DEPARTMENT AFL-CIO POLITICAL ACTION COMMITTEE (TTD/PAC)

A. Mailing Address 888 16TH ST NW SUITE 650

City State Zip Code
 WASHINGTON DC 20006

FEC ID number of contributing
federal political committee.

C C00280909

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

500.00

Date of Receipt

M M / D D / Y Y Y Y
 09 28 2015

Transaction ID : SA11C.64135

Amount of Each Receipt this Period

500.00

Full Name (Last, First, Middle Initial)
 TRAVELERS COMPANIES INC. POLITICAL ACTION COMMITTEE (TPAC), THE

B. Mailing Address One Tower Square

City State Zip Code
 Hartford CT 06183

FEC ID number of contributing
federal political committee.

C C00376376

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

1500.00

Date of Receipt

M M / D D / Y Y Y Y
 07 15 2015

Transaction ID : SA11C.64081

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)
 TRUCKING POLITICAL ACTION COMMITTEE OF THE AMERICAN TRUCKING ASSOCIATIONS INC.

C. Mailing Address 430 First St. SE

City State Zip Code
 Washington DC 20003

FEC ID number of contributing
federal political committee.

C C00002881

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y
 09 28 2015

Transaction ID : SA11C.63874

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

3000.00

TOTAL This Period (last page this line number only).....

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

UNITED TECHNOLOGIES CORPORATION, POLITICAL ACTION COMMITTEE**A.**

Mailing Address 1401 EYE STREET NW SUITE 600

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.**C** C00035683

Name of Employer

Occupation

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

2500.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		16		2015

Transaction ID : SA11C.64082

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)

VIACOM INTERNATIONAL, INC. POLITICAL ACTION COMMITTEE**B.**Mailing Address 1501 M STREET
SUITE 1100

City

WASHINGTON

State

DC

Zip Code

20005

FEC ID number of contributing
federal political committee.**C** C00167759

Name of Employer

Occupation

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		14		2015

Transaction ID : SA11C.63762

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

WAL-MART STORES INC. PAC FOR RESPONSIBLE GOVERNMENT**C.**

Mailing Address 702 S.W. 8th Street

City

Bentonville

State

AR

Zip Code

72716

FEC ID number of contributing
federal political committee.**C** C00093054

Name of Employer

Occupation

Receipt For: 2016

☐

Primary

☐

General

☒

Other (specify)

Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		16		2015

Transaction ID : SA11C.63790

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

4500.00

SCHEDULE A (FEC Form 3) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)
LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)
 WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

A.

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing
federal political committee.

C C00147173

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 07 / 22 / 2015

Transaction ID : SA11C.64289

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)
 WINE AND SPIRITS WHOLESALERS OF AMERICA, INC. POLITICAL ACTION COMMITTEE

B.

Mailing Address 805 FIFTEENTH ST NW SUITE 430

City	State	Zip Code
WASHINGTON	DC	20005

FEC ID number of contributing
federal political committee.

C C00147173

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☒ General
☐ Other (specify)

Election Cycle-to-Date

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 16 / 2015

Transaction ID : SA11C.63791

Amount of Each Receipt this Period

2500.00

Full Name (Last, First, Middle Initial)
ZENECA INC. POLITICAL ACTION COMMITTEE

C.

Mailing Address c/o Zeneca Inc.
 1800 Concord Pike PO Box 15437

City	State	Zip Code
Wilmington	DE	19850

FEC ID number of contributing
federal political committee.

C C00279455

Name of Employer

Occupation

Receipt For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

Election Cycle-to-Date

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
 09 / 30 / 2015

Transaction ID : SA11C.64186

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional).....

TOTAL This Period (last page this line number only).....

6000.00

168506.16

**SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a 12	<input type="checkbox"/> 11b 13a	<input type="checkbox"/> 11c 13b	<input checked="" type="checkbox"/> 11d 14	<input type="checkbox"/> 15
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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

JOHN B LARSON

Mailing Address 1887 OLD MAIN STREET

City

EAST HARTFORD

State

CT

Zip Code

06108

FEC ID number of contributing
federal political committee.**C** H8CT01046

Name of Employer

U. S. Congress

Occupation

Member of Congress

Receipt For:

☐ Primary
☐ Other (specify)

General

Election Cycle-to-Date

3968.50

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		18		2015

Transaction ID : SA14.63985

Amount of Each Receipt this Period

152.90

Mileage reimbursement

Full Name (Last, First, Middle Initial)

JOHN B LARSON

Mailing Address 1887 OLD MAIN STREET

City

EAST HARTFORD

State

CT

Zip Code

06108

FEC ID number of contributing
federal political committee.**C** H8CT01046

Name of Employer

U. S. Congress

Occupation

Member of Congress

Receipt For:

☐ Primary
☐ Other (specify)

General

Election Cycle-to-Date

4357.90

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		28		2015

Transaction ID : SA14.63847

Amount of Each Receipt this Period

389.40

Mileage reimbursement

Full Name (Last, First, Middle Initial)

People's United Insurance Agency

Mailing Address One Goodwin Square

City

Hartford

State

CT

Zip Code

06103

FEC ID number of contributing
federal political committee.**C**

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)

General

Election Cycle-to-Date

518.96

Date of Receipt

M M	/	D D	/	Y Y Y Y
07		29		2015

Transaction ID : SA14.64115

Amount of Each Receipt this Period

499.20

Refund of premium paid to Progressive Insurance

SUBTOTAL of Receipts This Page (optional).....

1041.50

TOTAL This Period (last page this line number only).....

1041.50

SCHEDULE A (FEC Form 3)
ITEMIZED RECEIPTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d	<input checked="" type="checkbox"/> 15
12	13a	13b	14	

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

Rockville Bank

Mailing Address 1009 Hebron Avenue

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)

General

Election Cycle-to-Date

563.07

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		02		2015

Transaction ID : SA15.63664

Amount of Each Receipt this Period

100.13

Interest

Full Name (Last, First, Middle Initial)

Rockville Bank

Mailing Address 1009 Hebron Avenue

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)

General

Election Cycle-to-Date

651.62

Date of Receipt

M M	/	D D	/	Y Y Y Y
08		31		2015

Transaction ID : SA15.63665

Amount of Each Receipt this Period

88.55

Interest

Full Name (Last, First, Middle Initial)

Rockville Bank

Mailing Address 1009 Hebron Avenue

City

Glastonbury

State

CT

Zip Code

06033

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify)

General

Election Cycle-to-Date

750.30

Date of Receipt

M M	/	D D	/	Y Y Y Y
09		30		2015

Transaction ID : SA15.64051

Amount of Each Receipt this Period

98.68

Interest

SUBTOTAL of Receipts This Page (optional).....**TOTAL** This Period (last page this line number only).....

287.36

287.36

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. (A)Squarestudio

Mailing Address 22 Brookview Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		31		2015

City	State	Zip Code
Middletown	CT	06457

Amount of Each Disbursement this Period

1031.25

Purpose of Disbursement
Web design servicesCategory/
Type

Transaction ID : SB17.63793

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. (A)Squarestudio

Mailing Address 22 Brookview Lane

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		24		2015

City	State	Zip Code
Middletown	CT	06457

Amount of Each Disbursement this Period

1031.25

Purpose of Disbursement
Web design servicesCategory/
Type

Transaction ID : SB17.64208

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Advanced Network Strategies, LLC

Mailing Address 236 Massachusetts Avenue, N.E.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		27		2015

City	State	Zip Code
Washington	DC	22220

Amount of Each Disbursement this Period

10754.28

Purpose of Disbursement
Fund raising fee and expensesCategory/
Type

Transaction ID : SB17.63623

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

12816.78

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Advanced Network Strategies, LLC

Mailing Address 236 Massachusetts Avenue, N.E.

City	State	Zip Code
Washington	DC	22220

Purpose of Disbursement
Fund raising fee and expenses

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		07		2015

Amount of Each Disbursement this Period

12868.06

Transaction ID : SB17.63691

B. Amazon

Mailing Address 1516 2nd Avenue

City	State	Zip Code
Seattle	WA	98101

Purpose of Disbursement
Supplies

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		06		2015

Amount of Each Disbursement this Period

29.75

Transaction ID : SB17.63591

c. American Express

Mailing Address P.O. Box 114

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement
Service charge

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2015

Amount of Each Disbursement this Period

7.95

Transaction ID : SB17.64279

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

12905.76

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 114

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement
Credit card payment (see below)

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		02		2015

Amount of Each Disbursement this Period

2019.12

Transaction ID : SB17.63118

B. National Democratic Club

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		21		2015

Amount of Each Disbursement this Period

247.50

Transaction ID : SB17.63118.1

[MEMO ITEM]

c. Montmartre Restaurant

Mailing Address 327 Seventh Avenue SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		22		2015

Amount of Each Disbursement this Period

50.35

Transaction ID : SB17.63118.2

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2019.12

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Peppercorn's Grill

Mailing Address P.O. Box 776

City	State	Zip Code
Plainville	CT	06062

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		29		2015

Amount of Each Disbursement this Period

70.84

Transaction ID : SB17.63118.3

[MEMO ITEM]**B. UBER Technologies**

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		31		2015

Amount of Each Disbursement this Period

10.21

Transaction ID : SB17.63118.5

[MEMO ITEM]**c. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		01		2015

Amount of Each Disbursement this Period

31.25

Transaction ID : SB17.63118.6

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. U. S. House Gift Shop

Mailing Address B-217 Longworth Bldg.

City	State	Zip Code
Washington	DC	20515

Purpose of Disbursement
Memorabilia

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2015

Amount of Each Disbursement this Period

37.95

Transaction ID : SB17.63118.7

[MEMO ITEM]**B. United States Postal Service**

Mailing Address Ann Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement
Postage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2015

Amount of Each Disbursement this Period

5.95

Transaction ID : SB17.63118.8

[MEMO ITEM]**c. United States Postal Service**

Mailing Address Ann Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement
Postage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		02		2015

Amount of Each Disbursement this Period

5.95

Transaction ID : SB17.63118.9

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. National Democratic Club

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		03		2015

Amount of Each Disbursement this Period

15.25

Transaction ID : SB17.63118.10

[MEMO ITEM]**B. Max Fish**

Mailing Address 140 Glastonbury Blvd.

City	State	Zip Code
Glastonbury	CT	06033

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		04		2015

Amount of Each Disbursement this Period

69.45

Transaction ID : SB17.63118.11

[MEMO ITEM]**c. Max Fish**

Mailing Address 140 Glastonbury Blvd.

City	State	Zip Code
Glastonbury	CT	06033

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

Amount of Each Disbursement this Period

189.31

Transaction ID : SB17.63118.12

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Max Fish

Mailing Address 140 Glastonbury Blvd.

City	State	Zip Code
Glastonbury	CT	06033

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

Amount of Each Disbursement this Period

108.77

Transaction ID : SB17.63118.13

[MEMO ITEM]**B. Federal Express**

Mailing Address Asylum Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement
Overnight courier

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		06		2015

Amount of Each Disbursement this Period

1.36

Transaction ID : SB17.63118.14

[MEMO ITEM]**c. Federal Express**

Mailing Address Asylum Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement
Overnight courier

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		06		2015

Amount of Each Disbursement this Period

17.97

Transaction ID : SB17.63118.15

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER Technologies

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		07		2015

Amount of Each Disbursement this Period

7.40

Transaction ID : SB17.63118.17

[MEMO ITEM]**B. UBER Technologies**

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		08		2015

Amount of Each Disbursement this Period

6.91

Transaction ID : SB17.63118.20

[MEMO ITEM]**c. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		08		2015

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.63118.21

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Dunkin Donuts

Mailing Address 271 Farmington Avenue

City	State	Zip Code
Hartford	CT	06116

Purpose of Disbursement
Food and beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		10		2015

Amount of Each Disbursement this Period

78.13

Transaction ID : SB17.63118.24

[MEMO ITEM]**B. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
POLITICAL MEALS

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		11		2015

Amount of Each Disbursement this Period

63.75

Transaction ID : SB17.63118.27

[MEMO ITEM]**C. Marriott Hartford Downtown**

Mailing Address 200 Columbus Boulevard

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		13		2015

Amount of Each Disbursement this Period

33.59

Transaction ID : SB17.63118.29

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Montemartre Restaurant

Mailing Address 327 7th Street SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		14		2015

Amount of Each Disbursement this Period

57.85

Transaction ID : SB17.63118.31

[MEMO ITEM]**B. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		15		2015

Amount of Each Disbursement this Period

122.50

Transaction ID : SB17.63118.32

[MEMO ITEM]**c. American Express**

Mailing Address P.O. Box 114

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement
Service charge

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		06		2015

Amount of Each Disbursement this Period

10.33

Transaction ID : SB17.64285

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

10.33

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 114

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement
Service charge

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Disbursement this Period

7.95

Transaction ID : SB17.64272

B. American Express

Mailing Address P.O. Box 114

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement
Service charge

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Disbursement this Period

152.08

Transaction ID : SB17.64278

C. American Express

Mailing Address P.O. Box 114

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement
Credit card payment (see below)

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Disbursement this Period

3308.32

Transaction ID : SB17.63521

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3468.32

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Marriott Hartford Downtown

Mailing Address 200 Columbus Boulevard

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement
Food and beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Disbursement this Period

6.38

Transaction ID : SB17.63521.2

[MEMO ITEM]**B. Marriott Hartford Downtown**

Mailing Address 200 Columbus Boulevard

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		19		2015

Amount of Each Disbursement this Period

66.24

Transaction ID : SB17.63521.3

[MEMO ITEM]**C. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		24		2015

Amount of Each Disbursement this Period

108.13

Transaction ID : SB17.63521.7

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. JetBlue Airways

Mailing Address 27-01 Queens Plaza

City	State	Zip Code
Long Island City	NY	11101

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		25		2015

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.63521.8

[MEMO ITEM]**B. Carmine's DC**

Mailing Address 425 7th Street NW

City	State	Zip Code
Washington	DC	20004

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		26		2015

Amount of Each Disbursement this Period

317.46

Transaction ID : SB17.63521.9

[MEMO ITEM]**c. Montemartre Restaurant**

Mailing Address 327 7th Street SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

42.20

Transaction ID : SB17.63521.10

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Pret A Manger

Mailing Address 1825 Eye Street, NW

City	State	Zip Code
Washington	DC	20006

Purpose of Disbursement
Food and beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		30		2015

Amount of Each Disbursement this Period

2885.00

Transaction ID : SB17.63521.11

[MEMO ITEM]**B. Hank's Oyster Bar**

Mailing Address 1624 Q Street NW

City	State	Zip Code
Washington	DC	20009

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		12		2015

Amount of Each Disbursement this Period

112.45

Transaction ID : SB17.63521.17

[MEMO ITEM]**C. National Democratic Club**

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		13		2015

Amount of Each Disbursement this Period

221.25

Transaction ID : SB17.63521.19

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Aqua A1 2

Mailing Address 212 7th Street SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 14 / 2015

Amount of Each Disbursement this Period

266.05

Transaction ID : SB17.63521.20

[MEMO ITEM]**B. Mandarin Oriental**

Mailing Address 1330 Maryland Avenue, NW

City	State	Zip Code
Washington	DC	20024

Purpose of Disbursement
Travel

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 15 / 2015

Amount of Each Disbursement this Period

2885.44

Transaction ID : SB17.63521.21

[MEMO ITEM]**c. American Express**

Mailing Address P.O. Box 114

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement
Credit card payment (see below)

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 27 / 2015

Amount of Each Disbursement this Period

1899.52

Transaction ID : SB17.63715

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1899.52

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. National Democratic Club

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Disbursement this Period

75.63

Transaction ID : SB17.63715.0

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

B. Peppercorn's Grill

Mailing Address P.O. Box 776

City	State	Zip Code
Plainville	CT	06062

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Disbursement this Period

188.41

Transaction ID : SB17.63715.1

[MEMO ITEM]

Full Name (Last, First, Middle Initial)

C. National Democratic Club

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Disbursement this Period

98.75

Transaction ID : SB17.63715.3

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Ridgewell Caterers

Mailing Address 5525 Dorsey Lane

Date of Disbursement

M M	D D	Y Y Y Y
07	22	2015

City	State	Zip Code
Bethesda	MD	20816

Amount of Each Disbursement this Period

226.54

Purpose of Disbursement
Catering

Transaction ID : SB17.63715.5

Candidate Name

Category/
Type**[MEMO ITEM]**

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

B. Trinity Restaurant

Mailing Address 243 Zion Street

Date of Disbursement

M M	D D	Y Y Y Y
07	24	2015

City	State	Zip Code
Hartford	CT	06106

Amount of Each Disbursement this Period

236.62

Purpose of Disbursement
Political meals

Transaction ID : SB17.63715.7

Candidate Name

Category/
Type**[MEMO ITEM]**

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

C. National Democratic Club

Mailing Address 30 Ivy Street, SE

Date of Disbursement

M M	D D	Y Y Y Y
07	28	2015

City	State	Zip Code
Washington	DC	20003

Amount of Each Disbursement this Period

121.88

Purpose of Disbursement
Political meals

Transaction ID : SB17.63715.10

Candidate Name

Category/
Type**[MEMO ITEM]**

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Federal Express

Mailing Address Asylum Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement
Overnight courier

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		10		2015

Amount of Each Disbursement this Period

47.76

Transaction ID : SB17.63715.17

[MEMO ITEM]**B. U. S. Airways**

Mailing Address Bradley International Airport

City	State	Zip Code
Windsor Locks	CT	06196

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		11		2015

Amount of Each Disbursement this Period

428.20

Transaction ID : SB17.63715.18

[MEMO ITEM]**c. Pret A Manger**

Mailing Address 1825 Eye Street, NW

City	State	Zip Code
Washington	DC	20006

Purpose of Disbursement
Food and beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Disbursement this Period

32.48

Transaction ID : SB17.63715.19

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Montemartre Restaurant

Mailing Address 327 7th Street SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		12		2015

Amount of Each Disbursement this Period

57.85

Transaction ID : SB17.63715.20

[MEMO ITEM]**B. American Express**

Mailing Address P.O. Box 114

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement
Service charge

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Disbursement this Period

7.95

Transaction ID : SB17.64266

c. American Express

Mailing Address P.O. Box 114

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement
Service charge

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		21		2015

Amount of Each Disbursement this Period

2.95

Transaction ID : SB17.64271

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

10.90

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Linda Christiana

Mailing Address 96 Oak Forest Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2015

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

367.25

Transaction ID : SB17.63582

B. Linda Christiana

Mailing Address 96 Oak Forest Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2015

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

367.25

Transaction ID : SB17.63635

c. Linda Christiana

Mailing Address 96 Oak Forest Drive

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		01		2015

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

717.05

Transaction ID : SB17.63805

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1451.55

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Collector of Revenue

Mailing Address 150424

City	State	Zip Code
East Hartford	CT	06115

Purpose of Disbursement
Taxes

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		14		2015

Amount of Each Disbursement this Period

237.55

Transaction ID : SB17.63606

B. Comcast Corporation

Mailing Address PO Box 1577

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement
Internet

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2015

Amount of Each Disbursement this Period

123.72

Transaction ID : SB17.63505

C. Comcast Corporation

Mailing Address PO Box 1577

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement
Internet

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Disbursement this Period

123.72

Transaction ID : SB17.63689

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

484.99

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Comcast Corporation

Mailing Address PO Box 1577

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement
Internet

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
09 / 10 / 2015

Amount of Each Disbursement this Period

123.72

Transaction ID : SB17.63821

B. Commissioner of Revenue Services

Mailing Address P.O. Box 5055

City	State	Zip Code
Hartford	CT	06102

Purpose of Disbursement
Taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
07 / 09 / 2015

Amount of Each Disbursement this Period

150.00

Transaction ID : SB17.63597

C. Commissioner of Revenue Services

Mailing Address P.O. Box 5055

City	State	Zip Code
Hartford	CT	06102

Purpose of Disbursement
Taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
08 / 13 / 2015

Amount of Each Disbursement this Period

300.00

Transaction ID : SB17.63701

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

573.72

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Commissioner of Revenue Services

Mailing Address P.O. Box 5055

City	State	Zip Code
Hartford	CT	06102

Purpose of Disbursement
Taxes

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
09 / 03 / 2015

Amount of Each Disbursement this Period

0.20

Transaction ID : SB17.63813

B. Connecticut Public Television

Mailing Address Asylum Avenue

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement
Event Tickets

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
09 / 28 / 2015

Amount of Each Disbursement this Period

5000.00

Transaction ID : SB17.64221

C. CT Senate Reunion

Mailing Address 83 Peach Tree Lane

City	State	Zip Code
Bristol	CT	06010

Purpose of Disbursement
Event Tickets

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
09 / 03 / 2015

Amount of Each Disbursement this Period

500.00

Transaction ID : SB17.63642

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5500.20

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CT Unemployment Tax

Mailing Address 200 Folly Brook Boulevard

City	State	Zip Code
Wethersfield	CT	06109

Purpose of Disbursement
Taxes

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2015

Amount of Each Disbursement this Period

258.50

Transaction ID : SB17.63598

B. CT Unemployment Tax

Mailing Address 200 Folly Brook Boulevard

City	State	Zip Code
Wethersfield	CT	06109

Purpose of Disbursement
Taxes

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Disbursement this Period

8.35

Transaction ID : SB17.63717

C. CT WORKING FAMILIES FEDERAL PAC D/B/A TAKE BACK CONGRESS CT

Mailing Address 621 FARMINGTON AVENUE

City	State	Zip Code
HARTFORD	CT	06105

Purpose of Disbursement
In-kind - Food and beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For: 2016

☐ Primary ☐ General
☒ Other (specify) Convention

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2015

Amount of Each Disbursement this Period

242.16

Transaction ID : SB17.63564

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

509.01

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. CT WORKING FAMILIES FEDERAL PAC D/B/A TAKE BACK CONGRESS CT

Mailing Address 621 FARMINGTON AVENUE

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		26		2015

City	State	Zip Code
HARTFORD	CT	06105

Amount of Each Disbursement this Period

264.00

Purpose of Disbursement
In-kind - staff time for event**Transaction ID : SB17.63566**

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify)	Convention

State: District:

Full Name (Last, First, Middle Initial)

B. Democratic State Central Committee - Fed. Account

Mailing Address 380 Franklin Avenue

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		18		2015

City	State	Zip Code
Hartford	CT	06116

Amount of Each Disbursement this Period

510.00

Purpose of Disbursement
Event Tickets**Transaction ID : SB17.63641**

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Full Name (Last, First, Middle Initial)

c. EarthLink, Inc.

Mailing Address P.O. Box 7645

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		14		2015

City	State	Zip Code
Atlanta	GA	30357

Amount of Each Disbursement this Period

24.95

Purpose of Disbursement
Web service**Transaction ID : SB17.63604**

Candidate Name

Category/
Type

Office Sought:

<input type="checkbox"/>	House
<input type="checkbox"/>	Senate
<input type="checkbox"/>	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

798.95

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. EarthLink, Inc.

Mailing Address P.O. Box 7645

City	State	Zip Code
Atlanta	GA	30357

Purpose of Disbursement
Web service

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		14		2015

Amount of Each Disbursement this Period

24.95

Transaction ID : SB17.63705

B. EarthLink, Inc.

Mailing Address P.O. Box 7645

City	State	Zip Code
Atlanta	GA	30357

Purpose of Disbursement
Web service

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Disbursement this Period

24.95

Transaction ID : SB17.63823

C. Exxon/Mobil

Mailing Address P. O. Box 688940

City	State	Zip Code
Des Moines	IA	50368

Purpose of Disbursement
Gasoline

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		10		2015

Amount of Each Disbursement this Period

199.27

Transaction ID : SB17.63502

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

249.17

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Exxon/Mobil

Mailing Address P. O. Box 688940

City	State	Zip Code
Des Moines	IA	50368

Purpose of Disbursement
Gasoline

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
08 / 13 / 2015

Amount of Each Disbursement this Period

179.53

Transaction ID : SB17.63703

B. Exxon/Mobil

Mailing Address P. O. Box 688940

City	State	Zip Code
Des Moines	IA	50368

Purpose of Disbursement
Gasoline

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
09 / 17 / 2015

Amount of Each Disbursement this Period

279.05

Transaction ID : SB17.63830

c. Federal Express

Mailing Address Asylum Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement
Overnight courier

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
07 / 01 / 2015

Amount of Each Disbursement this Period

25.62

Transaction ID : SB17.63581

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

484.20

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Federal Express

Mailing Address Asylum Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		06		2015

City	State	Zip Code
Hartford	CT	06105

Amount of Each Disbursement this Period

25.62

Purpose of Disbursement
Overnight courierCategory/
Type**Transaction ID : SB17.63592**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Federal Express

Mailing Address Asylum Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2015

City	State	Zip Code
Hartford	CT	06105

Amount of Each Disbursement this Period

25.86

Purpose of Disbursement
Overnight courierCategory/
Type**Transaction ID : SB17.63595**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Federal Express

Mailing Address Asylum Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2015

City	State	Zip Code
Hartford	CT	06105

Amount of Each Disbursement this Period

25.86

Purpose of Disbursement
Overnight courierCategory/
Type**Transaction ID : SB17.63607**

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

77.34

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Barry Feldman

Mailing Address 28 Uncas Road

City	State	Zip Code
Clinton	CT	06413-2315

Purpose of Disbursement
Overnight courier

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
07 / 01 / 2015

Amount of Each Disbursement this Period

2735.30

Transaction ID : SB17.63583

B. Barry Feldman

Mailing Address 28 Uncas Road

City	State	Zip Code
Clinton	CT	06413-2315

Purpose of Disbursement
Reimbursement - political meals

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
07 / 03 / 2015

Amount of Each Disbursement this Period

80.00

Transaction ID : SB17.63588

c. Ashley's

Mailing Address 221 Main Street

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement
Food and beverage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M / D D / Y Y Y Y
06 / 30 / 2015

Amount of Each Disbursement this Period

40.00

Transaction ID : SB17.63588.0

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....

TOTAL This Period (last page this line number only).....

2815.30

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Ashley's

Mailing Address 221 Main Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		02		2015

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement
Food and beverage

Amount of Each Disbursement this Period

40.00

Transaction ID : SB17.63588.1

[MEMO ITEM]

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Barry Feldman

Mailing Address 28 Uncas Road

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		30		2015

City	State	Zip Code
Clinton	CT	06413-2315

Purpose of Disbursement
Reimbursement - food and beverage

Amount of Each Disbursement this Period

110.00

Transaction ID : SB17.63627

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Ashley's

Mailing Address 221 Main Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		30		2015

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement
Food and beverage

Amount of Each Disbursement this Period

40.00

Transaction ID : SB17.63627.0

[MEMO ITEM]

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

110.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Ashley's

Mailing Address 221 Main Street

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement
Food and beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Disbursement this Period

2588.26

Transaction ID : SB17.63627.1

[MEMO ITEM]**B. Ashley's**

Mailing Address 221 Main Street

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement
Food and beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		25		2015

Amount of Each Disbursement this Period

30.00

Transaction ID : SB17.63627.2

[MEMO ITEM]**c. Barry Feldman**

Mailing Address 28 Uncas Road

City	State	Zip Code
Clinton	CT	06413-2315

Purpose of Disbursement
Overnight courier

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Disbursement this Period

2588.26

Transaction ID : SB17.63636

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2588.26

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Barry Feldman

Mailing Address 28 Uncas Road

City	State	Zip Code
Clinton	CT	06413-2315

Purpose of Disbursement
Overnight courier

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		01		2015

Amount of Each Disbursement this Period

2828.08

Transaction ID : SB17.63806

B. Goodwin College Foundation

Mailing Address 745 Burnside Avenue

City	State	Zip Code
East Hartford	CT	06108

Purpose of Disbursement
Event tickets

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2015

Amount of Each Disbursement this Period

1390.00

Transaction ID : SB17.63666

c. Ellen Hart

Mailing Address 31 Woodland Street

City	State	Zip Code
Hartford	CT	06105

Purpose of Disbursement
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify)

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		02		2015

Amount of Each Disbursement this Period

83.11

Transaction ID : SB17.63585

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4301.19

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Ellen Hart

Mailing Address 31 Woodland Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		27		2015

City	State	Zip Code
Hartford	CT	06105

Amount of Each Disbursement this Period

18.78

Purpose of Disbursement
Reimbursement - food and beverageCategory/
Type

Transaction ID : SB17.63622

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Hilton Hotels Hartford

Mailing Address 315 Trumbull Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2015

City	State	Zip Code
Hartford	CT	06103

Amount of Each Disbursement this Period

332.35

Purpose of Disbursement
CateringCategory/
Type

Transaction ID : SB17.63713

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Hoffman Auto

Mailing Address Connecticut Blvd.

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		30		2015

City	State	Zip Code
Eadt Hartford	CT	06108

Amount of Each Disbursement this Period

47.74

Purpose of Disbursement
Automobile serviceCategory/
Type

Transaction ID : SB17.63672

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

398.87

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. House of Flora Flower Market

Mailing Address PO box 330231

City	State	Zip Code
West Hartford	CT	06113

Purpose of Disbursement
Flowers

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
07 / 10 / 2015

Amount of Each Disbursement this Period

588.69

Transaction ID : SB17.63503

B. House of Flora Flower Market

Mailing Address PO box 330231

City	State	Zip Code
West Hartford	CT	06113

Purpose of Disbursement
Flowers

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
07 / 30 / 2015

Amount of Each Disbursement this Period

86.15

Transaction ID : SB17.63679

C. House of Flora Flower Market

Mailing Address PO box 330231

City	State	Zip Code
West Hartford	CT	06113

Purpose of Disbursement
Flowers

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
08 / 27 / 2015

Amount of Each Disbursement this Period

160.60

Transaction ID : SB17.63795

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

835.44

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. House of Flora Flower Market

Mailing Address PO box 330231

City	State	Zip Code
West Hartford	CT	06113

Purpose of Disbursement
Flowers

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		11		2015

Amount of Each Disbursement this Period

7	6	3	7	3	1

Transaction ID : SB17.63802

B. Samuel C. Iacobellis

Mailing Address 114 Steep Hollow Lane

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement
Salary

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		02		2015

Amount of Each Disbursement this Period

1	8	9	7	9

Transaction ID : SB17.63587

c. Samuel C. Iacobellis

Mailing Address 114 Steep Hollow Lane

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement
Salary

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2015

Amount of Each Disbursement this Period

1	3	6	9	1

Transaction ID : SB17.63596

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

700.01

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Samuel C. Iacobellis

Mailing Address 114 Steep Hollow Lane

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement
Salary

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Disbursement this Period

176.93

Transaction ID : SB17.63614

B. Samuel C. Iacobellis

Mailing Address 114 Steep Hollow Lane

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement
Salary

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Disbursement this Period

119.14

Transaction ID : SB17.63616

c. Samuel C. Iacobellis

Mailing Address 114 Steep Hollow Lane

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement
Salary

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		13		2015

Amount of Each Disbursement this Period

224.34

Transaction ID : SB17.63700

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

520.41

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Ledger Publications

Mailing Address 740 North Main Street

City	State	Zip Code
West Hartford	CT	06117

Purpose of Disbursement
Advertisement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2015

Amount of Each Disbursement this Period

350.00

Transaction ID : SB17.63796

B. Geoffrey R. Luxenberg

Mailing Address 45 Chatham Road

City	State	Zip Code
Manchester	CT	06042

Purpose of Disbursement
Reimbursement - food and beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Disbursement this Period

240.00

Transaction ID : SB17.63678

C. Macmillan

Mailing Address 175 5th Avenue

City	State	Zip Code
New York	NY	10010

Purpose of Disbursement
Books

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		13		2015

Amount of Each Disbursement this Period

864.22

Transaction ID : SB17.64295

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1454.22

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Macmillan

Mailing Address 175 5th Avenue

City	State	Zip Code
New York	NY	10010

Purpose of Disbursement
Books

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 13 / 2015

Amount of Each Disbursement this Period

864.22

Transaction ID : SB17.64297

B. Marketing Solutions, LLC

Mailing Address 109 Talcott Road

City	State	Zip Code
West Hartford	CT	06110

Purpose of Disbursement
Printing and Postage

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 16 / 2015

Amount of Each Disbursement this Period

3734.04

Transaction ID : SB17.63501

c. Marketing Solutions, LLC

Mailing Address 109 Talcott Road

City	State	Zip Code
West Hartford	CT	06110

Purpose of Disbursement
Printing and Postage

Candidate Name

Office Sought:	House
	Senate
	President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
08 / 03 / 2015

Amount of Each Disbursement this Period

546.05

Transaction ID : SB17.63680

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

5144.31

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Marketing Solutions, LLC

Mailing Address 109 Talcott Road

City	State	Zip Code
West Hartford	CT	06110

Purpose of Disbursement
Printing and Postage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Disbursement this Period

673.97

Transaction ID : SB17.63681

B. Marketing Solutions, LLC

Mailing Address 109 Talcott Road

City	State	Zip Code
West Hartford	CT	06110

Purpose of Disbursement
Printing and Postage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Disbursement this Period

921.56

Transaction ID : SB17.63683

c. Marketing Solutions, LLC

Mailing Address 109 Talcott Road

City	State	Zip Code
West Hartford	CT	06110

Purpose of Disbursement
Printing and Postage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		13		2015

Amount of Each Disbursement this Period

755.82

Transaction ID : SB17.63684

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2351.35

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Marketing Solutions, LLC

Mailing Address 109 Talcott Road

City	State	Zip Code
West Hartford	CT	06110

Purpose of Disbursement
Printing and Postage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 02 / 2015

Amount of Each Disbursement this Period

951.52

Transaction ID : SB17.63800

B. Marriott Hartford Downtown

Mailing Address 200 Columbus Boulevard

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement
Deposit for event

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 09 / 2015

Amount of Each Disbursement this Period

125.00

Transaction ID : SB17.63594

C. Marriott Hartford Downtown

Mailing Address 200 Columbus Boulevard

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement
Catering

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
07 / 20 / 2015

Amount of Each Disbursement this Period

707.02

Transaction ID : SB17.63612

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1783.54

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Max Downtown

Mailing Address 185 Asylum Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement
Catering

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Disbursement this Period

774.32

Transaction ID : SB17.63801

B. Max Downtown

Mailing Address 185 Asylum Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement
Catering

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Disbursement this Period

1353.74

Transaction ID : SB17.63803

C. Max Downtown

Mailing Address 185 Asylum Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2015

Amount of Each Disbursement this Period

562.60

Transaction ID : SB17.64218

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2690.66

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Merchant Services

Mailing Address P. O. Box 6600

City	State	Zip Code
Hagerstown	MD	21740

Purpose of Disbursement
Service charge

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		02		2015

Amount of Each Disbursement this Period

20.50

Transaction ID : SB17.64281

B. Merchant Services

Mailing Address P. O. Box 6600

City	State	Zip Code
Hagerstown	MD	21740

Purpose of Disbursement
Service charge

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2015

Amount of Each Disbursement this Period

15.32

Transaction ID : SB17.64282

C. Merchant Services

Mailing Address P. O. Box 6600

City	State	Zip Code
Hagerstown	MD	21740

Purpose of Disbursement
Service charge

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2015

Amount of Each Disbursement this Period

19.95

Transaction ID : SB17.64283

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

55.77

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Merchant Services

Mailing Address P. O. Box 6600

City	State	Zip Code
Hagerstown	MD	21740

Purpose of Disbursement
Service charge

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		03		2015

Amount of Each Disbursement this Period

25.12

Transaction ID : SB17.64284

B. Merchant Services

Mailing Address P. O. Box 6600

City	State	Zip Code
Hagerstown	MD	21740

Purpose of Disbursement
Service charge

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		04		2015

Amount of Each Disbursement this Period

183.63

Transaction ID : SB17.64274

C. Merchant Services

Mailing Address P. O. Box 6600

City	State	Zip Code
Hagerstown	MD	21740

Purpose of Disbursement
Service charge

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Disbursement this Period

10.98

Transaction ID : SB17.64275

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

219.73

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Merchant Services

Mailing Address P. O. Box 6600

City	State	Zip Code
Hagerstown	MD	21740

Purpose of Disbursement
Service charge

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Disbursement this Period

19.95

Transaction ID : SB17.64276

B. Merchant Services

Mailing Address P. O. Box 6600

City	State	Zip Code
Hagerstown	MD	21740

Purpose of Disbursement
Service charge

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		05		2015

Amount of Each Disbursement this Period

28.98

Transaction ID : SB17.64277

C. Merchant Services

Mailing Address P. O. Box 6600

City	State	Zip Code
Hagerstown	MD	21740

Purpose of Disbursement
Service charge

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Disbursement this Period

19.95

Transaction ID : SB17.64268

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

68.88

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Merchant Services

Mailing Address P. O. Box 6600

City	State	Zip Code
Hagerstown	MD	21740

Purpose of Disbursement
Service charge

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
09 / 03 / 2015

Amount of Each Disbursement this Period

46.59

Transaction ID : SB17.64269

B. Merchant Services

Mailing Address P. O. Box 6600

City	State	Zip Code
Hagerstown	MD	21740

Purpose of Disbursement
Service charge

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
09 / 08 / 2015

Amount of Each Disbursement this Period

74.50

Transaction ID : SB17.64270

c. Mitchell Development, LLC

Mailing Address P.O. Box 1235

City	State	Zip Code
South Windsor	CT	06074

Purpose of Disbursement
Storage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
07 / 09 / 2015

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.63572

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

221.09

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Mitchell Development, LLC

Mailing Address P.O. Box 1235

City	State	Zip Code
South Windsor	CT	06074

Purpose of Disbursement
Storage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
08 / 13 / 2015

Amount of Each Disbursement this Period

100.00

Transaction ID : SB17.63682

B. National Democratic Club

Mailing Address 30 Ivy Street, SE

City	State	Zip Code
Washington	DC	20003

Purpose of Disbursement
Political meals

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17.64216

c. NGP Software, Inc.

Mailing Address 1101 Vermont Avenue, NW

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement
Web services

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
07 / 02 / 2015

Amount of Each Disbursement this Period

725.00

Transaction ID : SB17.63584

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

885.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. NGP Software, Inc.

Mailing Address 1101 Vermont Avenue, NW

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement
Web services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		03		2015

Amount of Each Disbursement this Period

725.00

Transaction ID : SB17.63688

B. NGP Software, Inc.

Mailing Address 1101 Vermont Avenue, NW

City	State	Zip Code
Washington	DC	20005

Purpose of Disbursement
Web services

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2015

Amount of Each Disbursement this Period

725.00

Transaction ID : SB17.63807

C. NPIC, LLC

Mailing Address 255 Main Street

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement
Rent

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		01		2015

Amount of Each Disbursement this Period

700.00

Transaction ID : SB17.63507

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2150.00

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. NPIC, LLC

Mailing Address 255 Main Street

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement
Rent

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
07 / 31 / 2015

Amount of Each Disbursement this Period

700.00

Transaction ID : SB17.63673

B. NPIC, LLC

Mailing Address 255 Main Street

City	State	Zip Code
Hartford	CT	06106

Purpose of Disbursement
Rent

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
09 / 01 / 2015

Amount of Each Disbursement this Period

700.00

Transaction ID : SB17.63799

c. People's United Insurance Agency

Mailing Address One Goodwin Square

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement
Insurance premium

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
09 / 24 / 2015

Amount of Each Disbursement this Period

3238.00

Transaction ID : SB17.63804

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4638.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Peppercorn's Grill

Mailing Address P.O. Box 776

City	State	Zip Code
Plainville	CT	06062

Purpose of Disbursement
Food and beverage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		21		2015

Amount of Each Disbursement this Period

986.27

Transaction ID : SB17.63613

B. Perkins Coie

Mailing Address 1201 Third Avenue

City	State	Zip Code
Seattle	WA	98101

Purpose of Disbursement
Compliance advice

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2015

Amount of Each Disbursement this Period

60.00

Transaction ID : SB17.63798

C. Perkins Coie

Mailing Address 1201 Third Avenue

City	State	Zip Code
Seattle	WA	98101

Purpose of Disbursement
Compliance advice

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		24		2015

Amount of Each Disbursement this Period

900.00

Transaction ID : SB17.64240

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

986.27

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Poland Spring Direct

Mailing Address P. O. Box 856192

City	State	Zip Code
Louisville	KY	40285

Purpose of Disbursement
Water

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
07 / 14 / 2015

Amount of Each Disbursement this Period

12.50

Transaction ID : SB17.63603

B. Pret A Manger

Mailing Address 1825 Eye Street, NW

City	State	Zip Code
Washington	DC	20006

Purpose of Disbursement
Food and beverage

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
07 / 30 / 2015

Amount of Each Disbursement this Period

4.93

Transaction ID : SB17.63626

c. Sage Payment Solutions

Mailing Address 12120 Sunset Hills Road

City	State	Zip Code
Reston	VA	20190

Purpose of Disbursement
Service charge

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:	<input type="checkbox"/> Primary	<input type="checkbox"/> General
	<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
09 / 02 / 2015

Amount of Each Disbursement this Period

599.74

Transaction ID : SB17.64294

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

617.17

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Amanda P. Schoen

Mailing Address 347 Country Mill Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		14		2015

City	State	Zip Code
Fa Quay Wanna	NC	27526

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

69.26

Transaction ID : SB17.63605

B. Amanda P. Schoen

Mailing Address 347 Country Mill Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		16		2015

City	State	Zip Code
Fa Quay Wanna	NC	27526

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

117.74

Transaction ID : SB17.63610

C. Amanda P. Schoen

Mailing Address 347 Country Mill Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		23		2015

City	State	Zip Code
Fa Quay Wanna	NC	27526

Purpose of Disbursement
Salary

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Amount of Each Disbursement this Period

152.38

Transaction ID : SB17.63617

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

339.38

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Amanda P. Schoen

Mailing Address 347 Country Mill Way

City	State	Zip Code
Fa Quay Wanna	NC	27526

Purpose of Disbursement
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
08 / 06 / 2015

Amount of Each Disbursement this Period

110.82

Transaction ID : SB17.63690

B. Amanda P. Schoen

Mailing Address 347 Country Mill Way

City	State	Zip Code
Fa Quay Wanna	NC	27526

Purpose of Disbursement
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
08 / 13 / 2015

Amount of Each Disbursement this Period

159.30

Transaction ID : SB17.63699

C. Amanda P. Schoen

Mailing Address 347 Country Mill Way

City	State	Zip Code
Fa Quay Wanna	NC	27526

Purpose of Disbursement
Salary

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

Date of Disbursement

M M / D D / Y Y Y Y
08 / 20 / 2015

Amount of Each Disbursement this Period

278.70

Transaction ID : SB17.63708

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

548.82

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Amanda P. Schoen

Mailing Address 347 Country Mill Way

City	State	Zip Code
Fa Quay Wanna	NC	27526

Purpose of Disbursement
Salary

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		27		2015

Amount of Each Disbursement this Period

180.08

Transaction ID : SB17.63714

B. Amanda P. Schoen

Mailing Address 347 Country Mill Way

City	State	Zip Code
Fa Quay Wanna	NC	27526

Purpose of Disbursement
Salary

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Disbursement this Period

152.38

Transaction ID : SB17.63814

C. Amanda P. Schoen

Mailing Address 347 Country Mill Way

City	State	Zip Code
Fa Quay Wanna	NC	27526

Purpose of Disbursement
Salary

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		10		2015

Amount of Each Disbursement this Period

152.38

Transaction ID : SB17.63820

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

484.84

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Amanda P. Schoen

Mailing Address 347 Country Mill Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		17		2015

City	State	Zip Code
Fa Quay Wanna	NC	27526

Amount of Each Disbursement this Period

141.99

Purpose of Disbursement
Salary

Transaction ID : SB17.63829

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Amanda P. Schoen

Mailing Address 347 Country Mill Way

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		25		2015

City	State	Zip Code
Fa Quay Wanna	NC	27526

Amount of Each Disbursement this Period

131.59

Purpose of Disbursement
Salary

Transaction ID : SB17.63833

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

c. The Hartford

Mailing Address Hartford Plaza

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		13		2015

City	State	Zip Code
Hartford	CT	06103

Amount of Each Disbursement this Period

54.90

Purpose of Disbursement
Insurance

Transaction ID : SB17.63602

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

328.48

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 121 OF 151

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. The Hartford

Mailing Address Hartford Plaza

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		13		2015

City	State	Zip Code
Hartford	CT	06103

Amount of Each Disbursement this Period

54.90

Purpose of Disbursement
Insurance

Candidate Name

Category/
Type**Transaction ID : SB17.63698**

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. The Hartford

Mailing Address Hartford Plaza

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		14		2015

City	State	Zip Code
Hartford	CT	06103

Amount of Each Disbursement this Period

841.90

Purpose of Disbursement
Insurance

Candidate Name

Category/
Type**Transaction ID : SB17.63824**

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

c. The Vinci Group

Mailing Address 24 Huntington Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		10		2015

City	State	Zip Code
Manchester	CT	06040

Amount of Each Disbursement this Period

5317.50

Purpose of Disbursement
Fund raising

Candidate Name

Category/
Type**Transaction ID : SB17.63600**

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

6214.30

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. The Vinci Group

Mailing Address 24 Huntington Street

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement
Reimbursement - Printing and postage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Disbursement this Period

355.24

Transaction ID : SB17.63631

B. The Vinci Group

Mailing Address 24 Huntington Street

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement
Reimbursement - printing and postage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Disbursement this Period

62.02

Transaction ID : SB17.63632

c. The Vinci Group

Mailing Address 24 Huntington Street

City	State	Zip Code
Manchester	CT	06040

Purpose of Disbursement
Reimbursement - printing and postage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		31		2015

Amount of Each Disbursement this Period

195.60

Transaction ID : SB17.63633

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

612.86

SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. UBER Technologies

Mailing Address 182 Howard Street

City	State	Zip Code
San Francisco	CA	94105

Purpose of Disbursement
Travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		14		2015

Amount of Each Disbursement this Period

38.39

Transaction ID : SB17.63822

B. UCONN Foundation

Mailing Address 2390 Alumni Drive

City	State	Zip Code
Storrs	CT	06269

Purpose of Disbursement
Event tickets

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		13		2015

Amount of Each Disbursement this Period

800.00

Transaction ID : SB17.63667

c. UCONN Foundation

Mailing Address 2390 Alumni Drive

City	State	Zip Code
Storrs	CT	06269

Purpose of Disbursement
Event Tickets

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		15		2015

Amount of Each Disbursement this Period

150.00

Transaction ID : SB17.63640

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

988.39

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. United States Postal Service

Mailing Address Ann Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement
Postage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		23		2015

Amount of Each Disbursement this Period

35.70

Transaction ID : SB17.63615

B. United States Postal Service

Mailing Address Ann Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement
Postage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		03		2015

Amount of Each Disbursement this Period

11.90

Transaction ID : SB17.63810

C. United States Postal Service

Mailing Address Ann Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement
Postage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		09		2015

Amount of Each Disbursement this Period

14.00

Transaction ID : SB17.63819

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

61.60

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. United States Postal Service

Mailing Address Ann Street

City	State	Zip Code
Hartford	CT	06103

Purpose of Disbursement
Postage

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		16		2015

Amount of Each Disbursement this Period

82.00

Transaction ID : SB17.63828

B. United States Treasury

Mailing Address P.O. Box 371493

City	State	Zip Code
Pittsburgh	PA	15250

Purpose of Disbursement
Taxes

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		09		2015

Amount of Each Disbursement this Period

1119.36

Transaction ID : SB17.63599

c. United States Treasury

Mailing Address P.O. Box 371493

City	State	Zip Code
Pittsburgh	PA	15250

Purpose of Disbursement
Taxes

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		13		2015

Amount of Each Disbursement this Period

2209.50

Transaction ID : SB17.63702

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3410.86

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. United States Treasury

Mailing Address P.O. Box 371493

City	State	Zip Code
Pittsburgh	PA	15250

Purpose of Disbursement
Taxes

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2015

Amount of Each Disbursement this Period

201.12

Transaction ID : SB17.63808

B. Verizon Wireless

Mailing Address 20 Alexander Drive

City	State	Zip Code
Wallingford	CT	06492

Purpose of Disbursement
Cell phone service

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Disbursement this Period

1020.35

Transaction ID : SB17.63625

c. Verizon Wireless

Mailing Address 20 Alexander Drive

City	State	Zip Code
Wallingford	CT	06492

Purpose of Disbursement
Cell phone service

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		28		2015

Amount of Each Disbursement this Period

462.03

Transaction ID : SB17.63716

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1683.50

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Verizon Wireless

Mailing Address 20 Alexander Drive

City	State	Zip Code
Wallingford	CT	06492

Purpose of Disbursement
Cell phone service

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		28		2015

Amount of Each Disbursement this Period

477.64

Transaction ID : SB17.63834

B.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
-----	---	-----	---	---------

Amount of Each Disbursement this Period

--

C.

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
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Amount of Each Disbursement this Period

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SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

477.64

104604.20

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. American Express

Mailing Address P.O. Box 114

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement
Credit card payment (see below)

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Disbursement this Period

643.20

Transaction ID : SB21.63520

B. U. S. Airways

Mailing Address Bradley International Airport

City	State	Zip Code
Windsor Locks	CT	06196

Purpose of Disbursement
Travel - officially connected

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		15		2015

Amount of Each Disbursement this Period

643.20

Transaction ID : SB21.63520.0

[MEMO ITEM]

c. American Express

Mailing Address P.O. Box 114

City	State	Zip Code
Newark	NJ	07101

Purpose of Disbursement
Credit card payment (see below)

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		08		2015

Amount of Each Disbursement this Period

226.54

Transaction ID : SB21.63818

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

869.74

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. BERA FOR CONGRESS

Mailing Address POST OFFICE BOX 582496

City	State	Zip Code
ELK GROVE	CA	95758

Purpose of Disbursement
Contribution

Candidate Name

AMERISH BERA

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: CA District: 07

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		20		2015

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB21.63797

B. Bike to the Beach

Mailing Address 1900 K Street NW

City	State	Zip Code
Washington	DC	20006

Purpose of Disbursement
Contribution

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		27		2015

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB21.63675

C. BRAD ASHFORD FOR CONGRESS

Mailing Address PO BOX 24023

City	State	Zip Code
OMAHA	NE	68124

Purpose of Disbursement
Contribution

Candidate Name

BRAD ASHFORD

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: NE District: 02

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB21.63670

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Card Services

Mailing Address PO Box 13337

City	State	Zip Code
Philadelphia	PA	19101

Purpose of Disbursement
Credit card payment (see below)

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		02		2015

Amount of Each Disbursement this Period

2065.82

Transaction ID : SB21.63043

B. Sanditz Travel

Mailing Address 98 Washington Street

City	State	Zip Code
Middletown	CT	06457

Purpose of Disbursement
Officially connected - travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2015

Amount of Each Disbursement this Period

40.00

Transaction ID : SB21.63043.0

[MEMO ITEM]

C. Southwest Airlines

Mailing Address Bradley International Airport

City	State	Zip Code
Windsor Locks	CT	06096

Purpose of Disbursement
Officially connected - travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2015

Amount of Each Disbursement this Period

215.60

Transaction ID : SB21.63043.1

[MEMO ITEM]

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

2065.82

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. U. S. Airways

Mailing Address Bradley International Airport

Date of Disbursement

M M	/	D D	/	Y Y Y Y
05		27		2015

City	State	Zip Code
Windsor Locks	CT	06196

Amount of Each Disbursement this Period

236.66

Purpose of Disbursement
Officially connected - travel

Candidate Name

Category/
Type

Transaction ID : SB21.63043.2

[MEMO ITEM]

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

B. U. S. Airways

Mailing Address Bradley International Airport

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

City	State	Zip Code
Windsor Locks	CT	06196

Amount of Each Disbursement this Period

238.74

Purpose of Disbursement
Officially connected - travel

Candidate Name

Category/
Type

Transaction ID : SB21.63043.3

[MEMO ITEM]

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

c. U. S. Airways

Mailing Address Bradley International Airport

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

City	State	Zip Code
Windsor Locks	CT	06196

Amount of Each Disbursement this Period

181.54

Purpose of Disbursement
Officially connected - travel

Candidate Name

Category/
Type

Transaction ID : SB21.63043.4

[MEMO ITEM]

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify)

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. U. S. Airways

Mailing Address Bradley International Airport

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

City	State	Zip Code
Windsor Locks	CT	06196

Amount of Each Disbursement this Period

181.54

Purpose of Disbursement
Officially connected - travelCategory/
Type

Transaction ID : SB21.63043.5

[MEMO ITEM]

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. U. S. Airways

Mailing Address Bradley International Airport

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		05		2015

City	State	Zip Code
Windsor Locks	CT	06196

Amount of Each Disbursement this Period

181.54

Purpose of Disbursement
Officially connected - travelCategory/
Type

Transaction ID : SB21.63043.6

[MEMO ITEM]

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

c. Sanditz Travel

Mailing Address 98 Washington Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		08		2015

City	State	Zip Code
Middletown	CT	06457

Amount of Each Disbursement this Period

40.00

Purpose of Disbursement
Officially connected - travelCategory/
Type

Transaction ID : SB21.63043.7

[MEMO ITEM]

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Sanditz Travel

Mailing Address 98 Washington Street

City	State	Zip Code
Middletown	CT	06457

Purpose of Disbursement
Officially connected - travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		08		2015

Amount of Each Disbursement this Period

40.00

Transaction ID : SB21.63043.8

[MEMO ITEM]**B. U. S. Airways**

Mailing Address Bradley International Airport

City	State	Zip Code
Windsor Locks	CT	06196

Purpose of Disbursement
Officially connected - travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		08		2015

Amount of Each Disbursement this Period

342.10

Transaction ID : SB21.63043.9

[MEMO ITEM]**c. U. S. Airways**

Mailing Address Bradley International Airport

City	State	Zip Code
Windsor Locks	CT	06196

Purpose of Disbursement
Officially connected - travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		08		2015

Amount of Each Disbursement this Period

123.10

Transaction ID : SB21.63043.10

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 135 OF 151

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Sanditz Travel

Mailing Address 98 Washington Street

City	State	Zip Code
Middletown	CT	06457

Purpose of Disbursement
Officially connected - travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2015

Amount of Each Disbursement this Period

1	2	3	4	5	6	7	8	9	0	.									
											4	0	.	0	0				

Transaction ID : SB21.63043.11

[MEMO ITEM]**B. U. S. Airways**

Mailing Address Bradley International Airport

City	State	Zip Code
Windsor Locks	CT	06196

Purpose of Disbursement
Officially connected - travel

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		12		2015

Amount of Each Disbursement this Period

1	2	3	4	5	6	7	8	9	0	.									
											2	0	5	.	0	0			

Transaction ID : SB21.63043.12

[MEMO ITEM]**c. Card Services**

Mailing Address PO Box 13337

City	State	Zip Code
Philadelphia	PA	19101

Purpose of Disbursement
Credit card payment (see below)

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		30		2015

Amount of Each Disbursement this Period

1	2	3	4	5	6	7	8	9	0	.									
											1	7	4	1	.	1	4		

Transaction ID : SB21.63510

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1741.14

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. U. S. Airways

Mailing Address Bradley International Airport

City	State	Zip Code
Windsor Locks	CT	06196

Purpose of Disbursement
Travel - officially connected

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		23		2015

Amount of Each Disbursement this Period

291.10

Transaction ID : SB21.63510.0

[MEMO ITEM]**B. JetBlue Airways**

Mailing Address 27-01 Queens Plaza

City	State	Zip Code
Long Island City	NY	11101

Purpose of Disbursement
Travel - officially connected

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
06		25		2015

Amount of Each Disbursement this Period

453.74

Transaction ID : SB21.63510.1

[MEMO ITEM]**c. Sanditz Travel**

Mailing Address 98 Washington Street

City	State	Zip Code
Middletown	CT	06457

Purpose of Disbursement
Travel - officially connected

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		06		2015

Amount of Each Disbursement this Period

40.00

Transaction ID : SB21.63510.2

[MEMO ITEM]**SUBTOTAL** of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 137 OF 151

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. U. S. Airways

Mailing Address Bradley International Airport

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		06		2015

City	State	Zip Code
Windsor Locks	CT	06196

Amount of Each Disbursement this Period

299.10

Purpose of Disbursement
Travel - officially connected

Transaction ID : SB21.63510.3

Candidate Name

Category/
Type**[MEMO ITEM]**

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

B. Sanditz Travel

Mailing Address 98 Washington Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		13		2015

City	State	Zip Code
Middletown	CT	06457

Amount of Each Disbursement this Period

40.00

Purpose of Disbursement
Travel - officially connected

Transaction ID : SB21.63510.4

Candidate Name

Category/
Type**[MEMO ITEM]**

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

c. U. S. Airways

Mailing Address Bradley International Airport

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		13		2015

City	State	Zip Code
Windsor Locks	CT	06196

Amount of Each Disbursement this Period

264.10

Purpose of Disbursement
Travel - officially connected

Transaction ID : SB21.63510.5

Candidate Name

Category/
Type**[MEMO ITEM]**

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 138 OF 151

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. U. S. Airways

Mailing Address Bradley International Airport

Date of Disbursement

M M	D D	Y Y Y Y
07	13	2015

City	State	Zip Code
Windsor Locks	CT	06196

Amount of Each Disbursement this Period

264.10

Purpose of Disbursement
Travel - officially connected

Transaction ID : SB21.63510.6

Candidate Name

Category/
Type**[MEMO ITEM]**

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Card Services

Mailing Address PO Box 13337

Date of Disbursement

M M	D D	Y Y Y Y
09	02	2015

City	State	Zip Code
Philadelphia	PA	19101

Amount of Each Disbursement this Period

1458.70

Purpose of Disbursement
Credit card payment (see below)

Transaction ID : SB21.63809

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

C. Sanditz Travel

Mailing Address 98 Washington Street

Date of Disbursement

M M	D D	Y Y Y Y
07	21	2015

City	State	Zip Code
Middletown	CT	06457

Amount of Each Disbursement this Period

40.00

Purpose of Disbursement
Travel - officially connected

Transaction ID : SB21.63809.0

Candidate Name

Category/
Type**[MEMO ITEM]**

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1458.70

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 139 OF 151

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. U. S. Airways

Mailing Address Bradley International Airport

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		21		2015

City	State	Zip Code
Windsor Locks	CT	06196

Amount of Each Disbursement this Period

458.20

Purpose of Disbursement
Travel - officially connected

Transaction ID : SB21.63809.1

Candidate Name

Category/
Type**[MEMO ITEM]**

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

B. U. S. Airways

Mailing Address Bradley International Airport

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		28		2015

City	State	Zip Code
Windsor Locks	CT	06196

Amount of Each Disbursement this Period

144.10

Purpose of Disbursement
Travel - officially connected

Transaction ID : SB21.63809.2

Candidate Name

Category/
Type**[MEMO ITEM]**

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

Full Name (Last, First, Middle Initial)

c. U. S. Airways

Mailing Address Bradley International Airport

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		29		2015

City	State	Zip Code
Windsor Locks	CT	06196

Amount of Each Disbursement this Period

294.10

Purpose of Disbursement
Travel - officially connected

Transaction ID : SB21.63809.3

Candidate Name

Category/
Type**[MEMO ITEM]**

Office Sought:	House	Disbursement For:
	Senate	
	President	
State:	District:	<input type="checkbox"/> Primary <input type="checkbox"/> General
		<input type="checkbox"/> Other (specify)

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 140 OF 151

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. U. S. Airways

Mailing Address Bradley International Airport

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		30		2015

City	State	Zip Code
Windsor Locks	CT	06196

Amount of Each Disbursement this Period

134.10

Purpose of Disbursement
Travel - officially connectedCategory/
Type

Transaction ID : SB21.63809.4

[MEMO ITEM]

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

B. Sanditz Travel

Mailing Address 98 Washington Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		04		2015

City	State	Zip Code
Middletown	CT	06457

Amount of Each Disbursement this Period

40.00

Purpose of Disbursement
Travel - officially connectedCategory/
Type

Transaction ID : SB21.63809.5

[MEMO ITEM]

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Full Name (Last, First, Middle Initial)

c. U. S. Airways

Mailing Address Bradley International Airport

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		04		2015

City	State	Zip Code
Windsor Locks	CT	06196

Amount of Each Disbursement this Period

128.10

Purpose of Disbursement
Travel - officially connectedCategory/
Type

Transaction ID : SB21.63809.6

[MEMO ITEM]

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

0.00

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**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 141 OF 151

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. Sanditz Travel

Mailing Address 98 Washington Street

City	State	Zip Code
Middletown	CT	06457

Purpose of Disbursement
Travel - officially connected

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB21.63809.7

[MEMO ITEM]**B. U. S. Airways**

Mailing Address Bradley International Airport

City	State	Zip Code
Windsor Locks	CT	06196

Purpose of Disbursement
Travel - officially connected

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State:

District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
08		06		2015

Amount of Each Disbursement this Period

179.10

Transaction ID : SB21.63809.8

[MEMO ITEM]**C. CROWLEY FOR CONGRESS**

Mailing Address 84-56 GRAND AVENUE

City	State	Zip Code
ELMHURST	NY	11373

Purpose of Disbursement
Contribution

Candidate Name

JOSEPH CROWLEY

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: NY

District: 14

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		18		2015

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB21.64212

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

1000.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. DELBENE FOR CONGRESS

Mailing Address PO BOX 487

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		30		2015

City	State	Zip Code
BOTHELL	WA	98041

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.63687

Purpose of Disbursement
Contribution

Candidate Name

SUZAN K DELBENECategory/
Type

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: WA District: 01

Full Name (Last, First, Middle Initial)

**B. DEMOCRATIC CONGRESSIONAL CAMPAIGN COMMITTEE-
CONTRIBUTIONS**

Mailing Address 430 S CAPITOL ST SE 2ND FLOOR

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		30		2015

City	State	Zip Code
WASHINGTON	DC	20003

Amount of Each Disbursement this Period

50000.00

Transaction ID : SB21.64228

Purpose of Disbursement
Transfer of funds

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

Full Name (Last, First, Middle Initial)

C. East Hartford Interfaith Ministries

Mailing Address Main Street

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		23		2015

City	State	Zip Code
East Hartford	CT	06108

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB21.63637

Purpose of Disbursement
Contribution

Candidate Name

Category/
Type

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

54500.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 143 OF 151

<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. East Hartford Rotary Club

Mailing Address P.O. Box 280722

City	State	Zip Code
East Hartford	CT	06128

Purpose of Disbursement
Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: District:

Date of Disbursement

M M / D D / Y Y Y Y
09 / 09 / 2015

Amount of Each Disbursement this Period

600.00

Transaction ID : SB21.63645

B. GRAHAM FOR CONGRESS

Mailing Address PO BOX 310

City	State	Zip Code
TALLAHASSEE	FL	32302

Purpose of Disbursement
Contribution

Candidate Name

GWEN GRAHAM

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: FL District: 02

Date of Disbursement

M M / D D / Y Y Y Y
07 / 28 / 2015

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB21.63569

C. JIM COSTA FOR CONGRESSMailing Address 2037 W Bullard Avenue
355

City	State	Zip Code
Fresno	CA	93711

Purpose of Disbursement
Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input checked="" type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify)	

State: CA District: 20

Date of Disbursement

M M / D D / Y Y Y Y
09 / 30 / 2015

Amount of Each Disbursement this Period

2000.00

Transaction ID : SB21.64220

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

3600.00

**SCHEDULE B (FEC Form 3)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

Full Name (Last, First, Middle Initial)

A. NOLAN FOR CONGRESS VOLUNTEER COMMITTEEMailing Address 40138 SAWMILL ROAD
PO BOX 252City State Zip Code
EMILY MN 56447Purpose of Disbursement
Contribution

Candidate Name

RICHARD MICHAEL NOLAN

Office Sought:

☒ House
☐ Senate
☐ President

Disbursement For: 2016

☒ Primary ☐ General
☐ Other (specify)

State: MN District: 08

Date of Disbursement

M M	/	D D	/	Y Y Y Y
07		28		2015

Amount of Each Disbursement this Period

4500.00

Transaction ID : SB21.63671

B. Sgt. Felix M. Del Gregorio Scholarship

Mailing Address 6 Alcima Drive

City State Zip Code
Simsbury CT 06070Purpose of Disbursement
Contribution

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		02		2015

Amount of Each Disbursement this Period

1000.00

Transaction ID : SB21.63644

c. St. Patricks/St. Anthony Church

Mailing Address 285 Church Street

City State Zip Code
Hartford CT 06103Purpose of Disbursement
Contribution

Candidate Name

Office Sought:

☐ House
☐ Senate
☐ President

Disbursement For:

☐ Primary ☐ General
☐ Other (specify)

State: District:

Date of Disbursement

M M	/	D D	/	Y Y Y Y
09		23		2015

Amount of Each Disbursement this Period

2500.00

Transaction ID : SB21.63638

SUBTOTAL of Disbursements This Page (optional).....**TOTAL** This Period (last page this line number only).....

4500.00

74235.40

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 145 OF 151

FOR LINE NUMBER:
(check only one)☒ 9
☐ 10

NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Charles R. Epstein

Nature of Debt (Purpose):

Reimbursement - Food and Beverage

Mailing Address 19 Crest Drive

City State

Zip Code

Cromwell

CT

06416

Outstanding Balance Beginning This Period

100.00

Transaction ID : SD9.48266

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

100.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Hartford Courant

Nature of Debt (Purpose):

Refund

Mailing Address 285 Broad Street

City State

Zip Code

Hartford

CT

06051

Outstanding Balance Beginning This Period

899.99

Transaction ID : SD9.61715

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

899.99

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Geoffrey R. Luxenberg

Nature of Debt (Purpose):

Supplies

Mailing Address 45 Chatham Road

City

State

Zip Code

Manchester

CT

06042

Outstanding Balance Beginning This Period

156.32

Transaction ID : SD9.48276

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

156.32

1) **SUBTOTALS** This Period This Page (optional) ▶

1156.31

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 146 OF 151

FOR LINE NUMBER:
(check only one)☒ 9
☐ 10

NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Robert E. Patricelli

Nature of Debt (Purpose):

Reimbursement - Food

Mailing Address 77 Hartford Road

City State

Zip Code

Simsbury

CT

06070

Outstanding Balance Beginning This Period

524.48

Transaction ID : SD9.56160

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

524.48

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Suburban Liquor Shop

Nature of Debt (Purpose):

Beverages

Mailing Address 26 New Britain Avenue

City State

Zip Code

Rocky Hill

CT

06067

Outstanding Balance Beginning This Period

208.83

Transaction ID : SD9.48270

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

208.83

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional) ▶

733.31

2) **TOTALS** This Period (last page this line number only) ▶

1889.62

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

1889.62

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

PAGE 147 OF 151

FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Advanced Network Strategies, LLC

Nature of Debt (Purpose):

Fund Raising fees and expenses

Mailing Address 236 Massachusetts Avenue, N.E.

City State

Zip Code

Washington

DC

22220

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.64206

Amount Incurred This Period

8755.34

Payment This Period

0.00

Outstanding Balance at Close of This Period

8755.34

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Advanced Network Strategies, LLC

Nature of Debt (Purpose):

Fund Raising expenses

Mailing Address 236 Massachusetts Avenue, N.E.

City State

Zip Code

Washington

DC

22220

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.64287

Amount Incurred This Period

7075.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

7075.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

**AMERICAN FEDERATION OF TEACHERS COMMITTEE ON POLITICAL
EDUCATION**

Nature of Debt (Purpose):

Contribution returned 7/14/2012

Mailing Address 555 NEW JERSEY AVENUE N W

City

State

Zip Code

WASHINGTON

DC

20001

Outstanding Balance Beginning This Period

2500.00

Transaction ID : SD10.49876

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

2500.00

1) **SUBTOTALS** This Period This Page (optional) ▶

18330.84

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
schedule(s)
for each
numbered line)

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FOR LINE NUMBER:
(check only one)☐ 9
☒ 10

NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Marketing Solutions, LLC

Nature of Debt (Purpose):

Printing and Postage

Mailing Address 109 Talcott Road

City State

Zip Code

West Hartford

CT

06110

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.64290

Amount Incurred This Period

2839.29

Payment This Period

0.00

Outstanding Balance at Close of This Period

2839.29

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Marketing Solutions, LLC

Nature of Debt (Purpose):

Printing and Postage

Mailing Address 109 Talcott Road

City State

Zip Code

West Hartford

CT

06110

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.64291

Amount Incurred This Period

547.65

Payment This Period

0.00

Outstanding Balance at Close of This Period

547.65

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Perkins Coie

Nature of Debt (Purpose):

Compliance advice

Mailing Address 1201 Third Avenue

City

State

Zip Code

Seattle

WA

98101

Outstanding Balance Beginning This Period

630.00

Transaction ID : SD10.43734

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

630.00

1) **SUBTOTALS** This Period This Page (optional) ▶

4016.94

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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FOR LINE NUMBER:
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☒ 10

NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Steptoe & Johnson, LLP

Nature of Debt (Purpose):

Facility Fee

Mailing Address 1330 Connecticut Avenue, NW

City State

Zip Code

Washington

DC

20036

Outstanding Balance Beginning This Period

50.00

Transaction ID : SD10.37308

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

50.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Vinci Group

Nature of Debt (Purpose):

Fund raising

Mailing Address 24 Huntington Street

City State

Zip Code

Manchester

CT

06040

Outstanding Balance Beginning This Period

349.72

Transaction ID : SD10.63468

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

349.72

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Vinci Group

Nature of Debt (Purpose):

Fund raising

Mailing Address 24 Huntington Street

City

State

Zip Code

Manchester

CT

06040

Outstanding Balance Beginning This Period

62.02

Transaction ID : SD10.63466

Amount Incurred This Period

0.00

Payment This Period

62.02

Outstanding Balance at Close of This Period

0.00

1) **SUBTOTALS** This Period This Page (optional) ▶

399.72

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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☒ 10

NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Vinci Group

Nature of Debt (Purpose):

Fund raising

Mailing Address 24 Huntington Street

City State

Zip Code

Manchester

CT

06040

Outstanding Balance Beginning This Period

355.24

Transaction ID : SD10.63467

Amount Incurred This Period

0.00

Payment This Period

355.24

Outstanding Balance at Close of This Period

0.00

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

The Vinci Group

Nature of Debt (Purpose):

Fund raising

Mailing Address 24 Huntington Street

City State

Zip Code

Manchester

CT

06040

Outstanding Balance Beginning This Period

0.00

Transaction ID : SD10.64250

Amount Incurred This Period

5317.50

Payment This Period

0.00

Outstanding Balance at Close of This Period

5317.50

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

U. S. Capitol Historical Society

Nature of Debt (Purpose):

Calendars

Mailing Address 200 Maryland Avenue, S.E.

City

State

Zip Code

Washington

DC

20002

Outstanding Balance Beginning This Period

6010.00

Transaction ID : SD10.61999

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

6010.00

1) **SUBTOTALS** This Period This Page (optional) ▶

11327.50

2) **TOTALS** This Period (last page this line number only) ▶3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)..... ▶4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only) ▶

SCHEDULE D (FEC Form 3)**DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate
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☒ 10

NAME OF COMMITTEE (In Full)

LARSON FOR CONGRESS

A. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Verizon Wireless

Nature of Debt (Purpose):

Cell phone service

Mailing Address 20 Alexander Drive

City State

Zip Code

Wallingford

CT

06492

Outstanding Balance Beginning This Period

482.92

Transaction ID : SD10.42519

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

482.92

B. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

C. Full Name (Last, First, Middle Initial) of Debtor or Creditor

Nature of Debt (Purpose):

Mailing Address

City

State

Zip Code

Outstanding Balance Beginning This Period

Amount Incurred This Period

Payment This Period

Outstanding Balance at Close of This Period

1) **SUBTOTALS** This Period This Page (optional)

482.92

2) **TOTALS** This Period (last page this line number only)

34557.92

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only)

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

34557.92